



# Journal of the House

State of Indiana

112th General Assembly

First Regular Session

Twentieth Meeting Day

Wednesday Afternoon

February 14, 2001

The House convened at 1:00 p.m. with the Speaker in the Chair.

The invocation was offered by Reverend David W. Cross, Lakeville United Methodist Church, Lakeville, the guest of Representative Richard W. Mangus.

The Pledge of Allegiance to the Flag was led by Representative Mangus.

The Speaker ordered the roll of the House to be called:

T. Adams	Hoffman
Aguilera	Kersey
Alderman	Klinker
Atterholt	Kromkowski
Avery	Kruse
Ayres	Kruzan
Bardon	Kuzman
Bauer	Lawson
Becker	Leuck
Behning •	Liggett
Bischoff	J. Lutz
Bodiker	Lytle
Bosma	Mahern
Bottorff	Mangus
C. Brown	Mannweiler
T. Brown	McClain
Buck	Mellinger
Budak	Mock
Buell	Moses •
Burton	Munson
Cheney	Murphy
Cherry	Oxley
Cochran	Pelath
Cook •	Pond
Crawford	Porter
Crooks	Richardson
Crosby	Ripley
Day	Robertson
Denbo	Ruppel
Dickinson	Saunders
Dillon	Scholer
Dobis	M. Smith
Dumézich	V. Smith
Duncan	Steele
Dvorak	Stevenson
Espich	Stilwell
Foley	Sturtz
Frenz	Summers
Friend	Thompson
Frizzell	Tincher
Fry	Torr
GiaQuinta	Turner •
Goeglein	Ulmer
Goodin	Weinzapfel
Grubb	Welch
Harris	Whetstone
Hasler	Wolkins
Herndon	D. Young •
Herrell	Yount
Hinkle	Mr. Speaker

Roll Call 91: 95 present; 5 excused. The Speaker announced a quorum in attendance. [NOTE: • indicates those who were excused.]

## HOUSE MOTION

Mr. Speaker: I move that when we do adjourn, we adjourn until Thursday, February 15, 2001, at 10:00 a.m.

LYTLE

Motion prevailed.

## MESSAGE FROM THE SENATE

Mr. Speaker: I am directed by the Senate to inform the House that the Senate has passed Engrossed Senate Bills 8, 106, 134, 154, 158, 176, 178, 186, 199, 205, 215, and 233 and the same are herewith transmitted to the House for further action.

MARY C. MENDEL  
Principal Secretary of the Senate

## MESSAGE FROM THE SENATE

Mr. Speaker: I am directed by the Senate to inform the House that the Senate has passed Engrossed Senate Bills 123, 151, 196, 237, 337, 389, 395, 432, and 582 and the same are herewith transmitted to the House for further action.

MARY C. MENDEL  
Principal Secretary of the Senate

## MESSAGE FROM THE SENATE

Mr. Speaker: I am directed by the Senate to inform the House that the Senate has passed House Concurrent Resolution 20 and the same is herewith returned to the House.

MARY C. MENDEL  
Principal Secretary of the Senate

## REPORTS FROM COMMITTEES

### COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred House Bill 1139, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 1, line 17, delete "or" insert "."

Page 2, delete line 1.

(Reference is to HB 1139 as introduced.)  
and when so amended that said bill do pass.

Committee Vote: yeas 11, nays 0.

C. BROWN, Chair

Report adopted.

### COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred House Bill 1197, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill do pass.

Committee Vote: yeas 10, nays 2.

C. BROWN, Chair

Report adopted.

### COMMITTEE REPORT

Mr. Speaker: Your Committee on Judiciary, to which was referred House Bill 1248, has had the same under consideration and begs

leave to report the same back to the House with the recommendation that said bill do pass.

Committee Vote: yeas 9, nays 2.

STURTZ, Chair

Report adopted.

#### COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred House Bill 1249, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 3, line 10, delete "seventy-five" and insert "**forty-five**".

Page 3, line 10, delete "(\$75,000)" and insert "**(\$45,000)**".

(Reference is to HB 1249 as introduced.)

and when so amended that said bill do pass.

Committee Vote: yeas 10, nays 1.

C. BROWN, Chair

Report adopted.

#### COMMITTEE REPORT

Mr. Speaker: Your Committee on Judiciary, to which was referred House Bill 1478, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 1, between lines 15 and 16, insert:

"SECTION 2. IC 34-6-2-88 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 88. "Nonparty", for purposes of IC 34-51-2, means a person who caused or contributed to cause the alleged injury, death, or damage to property, **and who is or may be liable to the claimant in part or in whole for the damages claimed**, but who has not been joined in the action as a defendant."

Renumber all SECTIONS consecutively.

(Reference is to HB 1478 as introduced.)

and when so amended that said bill do pass.

Committee Vote: yeas 12, nays 0.

STURTZ, Chair

Report adopted.

#### COMMITTEE REPORT

Mr. Speaker: Your Committee on Agriculture, Natural Resources and Rural Development, to which was referred House Bill 1511, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 2, delete lines 30 through 37.

(Reference is to HB 1511 as introduced.)

and when so amended that said bill do pass.

Committee Vote: yeas 11, nays 0.

LYTLE, Chair

Report adopted.

#### COMMITTEE REPORT

Mr. Speaker: Your Committee on Judiciary, to which was referred House Bill 1628, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 2, line 40, delete "hospital, surgeon, or physician" and insert "**health care provider**".

Page 2, line 40, after "shall" delete "honor" and insert "**follow**".

Page 2, line 40, delete "deceased".

Page 2, line 41, after "gift" insert "**directive**".

Page 3, between lines 7 and 8, begin a new paragraph and insert:

"(e) **A health care provider is immune from civil liability for following a donor's unrevoked anatomical gift directive under this chapter or IC 9-24-17.**"

Page 3, after line 41, begin a new paragraph and insert:

"SECTION 4. IC 34-30-2-117.5 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE

JULY 1, 2001]: **Sec. 117.5. IC 29-2-16-2.5 (Concerning health care provider immunity and anatomical gifts).**".

Renumber all SECTIONS consecutively.

(Reference is to HB 1628 as introduced.)

and when so amended that said bill do pass.

Committee Vote: yeas 10, nays 0.

STURTZ, Chair

Report adopted.

#### COMMITTEE REPORT

Mr. Speaker: Your Committee on Judiciary, to which was referred House Bill 1841, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 7, line 17, after "dissolution;" delete "or".

Page 7, line 27, delete "dissolution." and insert "dissolution;**or**".

Page 7, line 30, after "(4)" insert "**(3)**".

Page 7, line 30, reset in roman "the man undergoes a".

Page 7, line 30, after "undergoes a" insert "**genetic**".

Page 7, line 30, reset in roman "test that indicates with at least a".

Page 7, reset in roman lines 31 through 32.

Page 7, line 36, delete "either of the following conditions exist:".

Page 7, line 37, delete "(1)".

Page 7, line 37, delete "The" and insert "the".

Page 7, run in lines 36 through 37.

Page 7, delete lines 40 through 41.

Page 11, delete lines 18 through 33.

(Reference is to HB 1841 as introduced.)

and when so amended that said bill do pass.

Committee Vote: yeas 8, nays 2.

STURTZ, Chair

Report adopted.

#### COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred House Bill 1845, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Delete the title and insert the following:

A BILL FOR AN ACT concerning health and to make an appropriation.

Page 1, delete lines 10 through 18, begin a new line block indented and insert:

"(2) **A hospice program (as defined in IC 16-25-1.1-4).**

(3) **A home health agency licensed under IC 16-27-1.**

(4) **A health facility licensed under IC 16-28.**

(d) **There is established the Indiana commission on excellence in health care.**

(e) **The commission consists of the following members:**

(1) **Four (4) members appointed from the house of representatives by the speaker of the house of representatives. Not more than two (2) of the members appointed under this subdivision may be members of the same political party.**

(2) **Four (4) members appointed from the senate by the president pro tempore of the senate. Not more than two (2) of the members appointed under this subdivision may be members of the same political party.**

(3) **The governor or the governor's designee.**

(4) **The state health commissioner appointed under IC 16-19-4-2 or the commissioner's designee.**

(5) **One (1) member appointed by the governor who is a former dean or former faculty member of the Indiana University School of Medicine.**

(6) **One (1) member appointed by the governor who is a former dean or former faculty member of an Indiana school of nursing.**

(7) **One (1) member appointed by the governor who is a health care provider or a representative for individuals who have both a mental illness and a developmental disability.**

(f) **The commission shall meet upon the call of the chairperson.**

(g) **The affirmative votes of at least seven (7) voting members of**

the commission are required for the commission to take any action, including the approval of a final report.

(h) The speaker of the house of representatives shall appoint the chairperson of the commission during odd-numbered years beginning January 1. The president pro tempore of the senate shall appoint the chairperson of the commission during even-numbered years beginning January 1.

(i) Each member of the commission who is not a state employee is entitled to the minimum salary per diem provided by IC 4-10-11-2.1(b). The member is also entitled to reimbursement for traveling expenses as provided under IC 4-13-1-4 and other expenses actually incurred in connection with the member's duties as provided in the state policies and procedures established by the Indiana department of administration and approved by the budget agency.

(j) Each member of the commission who is a state employee but who is not a member of the general assembly is entitled to reimbursement for traveling expenses as provided under IC 4-13-1-4 and other expenses actually incurred in connection with the member's duties as provided in the state policies and procedures established by the Indiana department of administration and approved by the budget agency.

(k) Each member of the commission who is a member of the general assembly is entitled to receive the same per diem, mileage, and travel allowances paid to members of the general assembly serving on interim study committees established by the legislative council.

(l) The state department of health shall provide staff support to the commission, including preparing minutes, reports, and agendas for the commission, administering per diem, mileage, and travel payments for members of the commission who are not legislators, and reserving rooms for meetings held at state department of health facilities. The legislative services agency shall maintain a mailing list of interested parties, prepare and mail meeting notices of the commission and subcommittees, copy and distribute minutes and reports, reserve rooms for commission meetings held at the state house, and administer per diem, mileage, and travel payments for members of the commission who are legislators. The state department of health and the legislative services agency are not required to provide staff assistance to subcommittees, except that the state department shall make copies of reports and other documents produced or submitted to the subcommittee.

(m) Except for duties performed by the legislative services agency, the expenses of the commission shall be paid from funds appropriated to the state department of health.

(n) The commission shall study the quality of health care, including mental health, and develop a comprehensive statewide strategy for improving the health care delivery system. The commission shall do the following:

- (1) Identify existing data sources that evaluate quality of health care in Indiana and collect, analyze, and evaluate this data.
- (2) Establish guidelines for data sharing and coordination.
- (3) Identify core sets of quality measures for standardized reporting by appropriate components of the health care continuum.
- (4) Recommend a framework for quality measurement and outcome reporting.
- (5) Develop quality measures that enhance and improve the ability to evaluate and improve care.
- (6) Make recommendations regarding research and development needed to advance quality measurement and reporting.
- (7) Evaluate regulatory issues relating to the pharmacy profession and recommend changes necessary to optimize patient safety.
- (8) Facilitate open discussion of a process to ensure that comparative information on health care quality is valid, reliable, comprehensive, understandable, and widely available in the public domain.
- (9) Sponsor public hearings to share information and expertise, identify best practices, and recommend methods to promote their acceptance.

(10) Evaluate current regulatory programs to determine what changes, if any, need to be made to facilitate patient safety.

(11) Review public and private health care purchasing systems to determine if there are sufficient mandates and incentives to facilitate continuous improvement in patient safety.

(12) Analyze how effective existing regulatory systems are in ensuring continuous competence and knowledge of effective safety practices.

(13) Develop a framework for organizations that license, accredit, or credential health care professionals and health care providers to more quickly and effectively identify unsafe providers and professionals and to take action necessary to remove an unsafe provider or professional from practice or operation until the professional or provider has proven safe to practice or operate.

(14) Recommend procedures for development of a curriculum on patient safety and methods of incorporating the curriculum into training, licensure, and certification requirements.

(15) Develop a framework for regulatory bodies to disseminate information on patient safety to health care professionals, health care providers, and consumers through conferences, journal articles and editorials, newsletters, publications, and Internet websites.

(16) Recommend procedures to incorporate recognized patient safety considerations into practice guidelines and into standards related to the introduction and diffusion of new technologies, therapies, and drugs.

(17) Recommend a framework for development of community based collaborative initiatives for error reporting and analysis and implementation of patient safety improvements.

(18) Evaluate the role of advertising in promoting or adversely affecting patient safety.

(19) Evaluate and make recommendations regarding the need for licensure of additional persons who participate in the delivery of health care to Indiana residents.

(20) Evaluate the benefits and problems of the current disciplinary systems and make recommendations regarding alternatives and improvements.

(21) Study and make recommendations concerning the long term care system, including self-directed care plans and the regulation and reimbursement of public and private facilities that provide long term care.

(22) Study any other topic required by the chairperson.

(o) The commission may create subcommittees to study topics, receive testimony, and prepare reports on topics assigned by the commission. The chairperson shall select from the topics listed under subsection (n) the topics to be studied by the commission and subcommittees each year. The chairperson shall appoint persons to act as chairperson and secretary of each subcommittee. The commission shall by majority vote appoint members to each subcommittee. A member of a subcommittee, including a commission member while serving on a subcommittee, is not entitled to per diem, mileage, or travel allowances.

(p) The commission shall submit:

(1) interim reports not later than October 1, 2001, and October 1, 2002; and

(2) a final report not later than October 1, 2003;

to the governor, members of the health finance commission, and the legislative council. With the consent of the chairperson of the commission and the chairperson of the health finance commission, the commission and the health finance commission may conduct joint meetings.

(q) The findings, recommendations, evaluations, opinions, investigations, proceedings, records, reports, minutes, testimony, correspondence, work product, and actions of the commission and subcommittees shall be available to the public, but may not be introduced into evidence in any judicial or administrative proceeding against a health care professional or health care provider arising out of the matters that are the subject of the findings of the commission or a subcommittee. However, information that is otherwise discoverable or admissible from original sources is not immune

from discovery or use in any proceeding merely because it was presented during proceedings of the commission or a subcommittee.

(r) A member of the commission or a subcommittee may not be examined in any judicial or administrative proceeding against a health care professional or health care provider concerning any evidence or other matters produced or presented during the proceedings of the commission or a subcommittee or concerning any findings, recommendations, evaluations, opinions, investigations, proceedings, records, reports, minutes, testimony, correspondence, work product, or other actions of the commission or a subcommittee. However, an individual who testifies before the commission or a subcommittee or who is a member of the commission or a subcommittee is not immune from testifying concerning matters within the individual's personal knowledge in a subsequent judicial or administrative proceeding merely because the individual testified before the commission or a subcommittee.

(s) The findings, recommendations, evaluations, opinions, investigations, proceedings, records, reports, minutes, testimony, correspondence, work product, and actions of the commission shall be used as a guide and resource and may not be construed as establishing or advocating the standard of care for health care professionals or health care providers unless subsequently enacted into law or adopted by rule.

(t) The findings, recommendations, evaluations, opinions, investigations, proceedings, records, reports, minutes, testimony, correspondence, work product, or actions of the commission or a subcommittee are not admissible as evidence in any way, directly or indirectly, by introduction of documents or as a basis of an expert opinion concerning the standard of care applicable to health care professionals or health care providers in any judicial or administrative proceeding unless subsequently enacted into law or adopted by rule.

(u) A person who testifies before the commission or a subcommittee or who is a member of the commission or a subcommittee may not specifically identify any patient, health care professional, or health care provider by name. In addition, the findings, recommendations, evaluations, opinions, investigations, proceedings, records, reports, minutes, testimony, correspondence, work product, and actions of the commission or a subcommittee may not specifically identify any patient, health care professional, or health care provider by name.

(v) In addition to any other funds appropriated to the state department of health, there is appropriated to the state department of health from the state general fund:

(1) thirty-four thousand four hundred dollars (\$34,400) beginning July 1, 2001, and ending June 30, 2002;

(2) thirty-four thousand four hundred dollars (\$34,400) beginning July 1, 2002, and ending June 30, 2003; and

(3) thirty-four thousand four hundred dollars (\$34,400) beginning July 1, 2003, and ending June 30, 2004;

for personnel services and other operating expenses related to the operation of the commission.

(w) This SECTION expires July 1, 2004.

SECTION 2. An emergency is declared for this act."

Delete pages 2 through 6.

(Reference is to HB 1845 as introduced.)

and when so amended that said bill do pass.

Committee Vote: yeas 11, nays 1.

C. BROWN, Chair

Report adopted.

#### COMMITTEE REPORT

Mr. Speaker: Your Committee on Judiciary, to which was referred House Bill 1977, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill do pass.

Committee Vote: yeas 12, nays 0.

STURTZ, Chair

Report adopted.

#### COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred House Bill 2101, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 2, between lines 2 and 3, begin a new paragraph and insert:

"SECTION 2. [EFFECTIVE JANUARY 1, 2001 (RETROACTIVE)](a)

The office of Medicaid policy and planning shall not, before July 1, 2003, adjust rates, which include product costs and the dispensing fee, paid to pharmacies participating in the Medicaid program from the rate levels that were in place on January 1, 2001. If the office of Medicaid policy and planning determines to adjust rates on or after July 1, 2003, the office must first conduct the survey required by IC 12-15-31.

(b) This SECTION expires July 2, 2004."

Renumber all SECTIONS consecutively.

(Reference is to HB 2101 as introduced.)

and when so amended that said bill do pass.

Committee Vote: yeas 12, nays 0.

C. BROWN, Chair

Report adopted.

#### ENGROSSED HOUSE BILLS ON THIRD READING

##### Engrossed House Joint Resolution 4

Representative Avery called down Engrossed House Joint Resolution 4 for third reading:

A JOINT RESOLUTION proposing an amendment to Article 15, Section 3 of the Constitution of the State of Indiana concerning state officers.

The joint resolution was read a third time by sections and placed upon its passage. The question was, Shall the joint resolution pass?

Roll Call 92: yeas 74, nays 17. The joint resolution was declared passed. The question was, Shall the title of the joint resolution remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the joint resolution. Senate sponsors: Senators Landske and Bowser.

##### Engrossed House Bill 2126

Representative Ayres called down Engrossed House Bill 2126 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning education.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Representative Bardon was excused from voting. Roll Call 93: yeas 90, nays 2. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsors: Senators Server and Alexa.

##### Engrossed House Bill 2124

Representative Dickinson called down Engrossed House Bill 2124 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning child care.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 94: yeas 72, nays 22. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsors: Senators .

**Engrossed House Bill 2117**

Representative Ripley called down Engrossed House Bill 2117 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning financial institutions.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 95: yeas 92, nays 0. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsor: Senator C. Lawson.

**Engrossed House Bill 2096**

Representative Klinker called down Engrossed House Bill 2096 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning professions and occupations.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 96: yeas 88, nays 6. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsors: Senators Alting, Simpson, Miller, and Rogers.

**Engrossed House Bill 2041**

Representative Weinzapfel called down Engrossed House Bill 2041 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning environmental law.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Representative Hasler was excused from voting. Roll Call 97: yeas 93, nays 0. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsor: Senator Gard.

**Engrossed House Bill 2025**

Representative Kromkowski called down Engrossed House Bill 2025 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning pensions.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 98: yeas 78, nays 16. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsors: Senators Harrison and Craycraft.

**Engrossed House Bill 1971**

Representative V. Smith called down Engrossed House Bill 1971 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning education.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 99: yeas 92, nays 0. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsors: Senators Wyss, Rogers, and S. Smith.

**Engrossed House Bill 1948**

Representative Welch called down Engrossed House Bill 1948 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning taxation.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 100: yeas 93, nays 0. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsors: Senators R. Meeks, Simpson, and Skillman.

**Engrossed House Bill 1937**

Representative Grubb called down Engrossed House Bill 1937 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning insurance.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 101: yeas 84, nays 0. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsors: Senators Paul and Mrvan.

**Engrossed House Bill 1935**

Representative Harris called down Engrossed House Bill 1935 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning environmental law.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 102: yeas 91, nays 0. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsors: Senators Gard, Rogers, S. Smith, and Simpson.

**Engrossed House Bill 1916**

Representative Frenz called down Engrossed House Bill 1916 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning state and local administration.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 103: yeas 92, nays 0. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsors: Senators R. Meeks, Hume, and Waterman.

**Engrossed House Bill 1874**

Representative L. Lawson called down Engrossed House Bill 1874 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning domestic protection orders.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 104: yeas 93, nays 0. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsors: Senators Clark and Simpson.

**Engrossed House Bill 1855**

Representative Burton called down Engrossed House Bill 1855 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning criminal law and procedure.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 105: yeas 91, nays 0. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsors: Senators Wyss and Alexa.

The House recessed until the fall of the gavel.

**RECESS**

The House reconvened at 2:55 p.m. with the Speaker Pro Tempore, Representative Dobis, in the Chair.

**REPORTS FROM COMMITTEES****COMMITTEE REPORT**

Mr. Speaker: Your Committee on Public Policy, Ethics and Veterans Affairs, to which was referred House Bill 1229, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill do pass.

Committee Vote: yeas 14, nays 0.

KUZMAN, Chair

Report adopted.

**COMMITTEE REPORT**

Mr. Speaker: Your Committee on Environmental Affairs, to which was referred House Bill 1368, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 17, line 13, after "purposes" insert "**at coal mines regulated under IC 14-34.**"

Page 17, delete lines 14 through 15.

Page 25, line 2, after "2," insert "**3, 4,**"

Page 25, delete lines 28 through 33, begin a new line block indented and insert:

**"(7) Research or educational programs conducted by or on behalf of a college, university, or secondary school that are:**

**(A) authorized by the chief executive officer of the educational institution or the officer's designee; or**

**(B) conducted under the policy of the educational institution; and conducted in accordance with the laws of the United States and of Indiana."**

Page 26, line 4, after "agricultural" insert "**or business**".

Page 26, line 12, delete "Class B" and insert "**Class C**".

Page 26, line 23, delete "Class A felony." and insert "**Class C felony. However, the offense is a Class B felony if the person has a prior unrelated conviction for an offense under this section.**"

Page 26, line 27, delete "Class A" and insert "**Class C**".

Page 26, line 34, delete "twenty-one (21)" and insert "**eighteen (18)**".

Page 27, line 27, delete "Class B" and insert "**Class A**".

(Reference is to HB 1368 as introduced.)

and when so amended that said bill do pass.

Committee Vote: yeas 9, nays 0.

WEINZAPFEL, Chair

Report adopted.

**COMMITTEE REPORT**

Mr. Speaker: Your Committee on Public Policy, Ethics and Veterans Affairs, to which was referred House Bill 1424, has had the same

under consideration and begs leave to report the same back to the House with the recommendation that said bill do pass.

Committee Vote: yeas 12, nays 0.

KUZMAN, Chair

Report adopted.

**COMMITTEE REPORT**

Mr. Speaker: Your Committee on Local Government, to which was referred House Bill 1611, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 2, between lines 13 and 14, begin a new line block indented and insert:

**"(7) The town legislative body may not appoint a police officer employed by the town to serve on the board."**

(Reference is to HB 1611 as introduced.)

and when so amended that said bill do pass.

Committee Vote: yeas 12, nays 0.

STEVENSON, Chair

Report adopted.

**COMMITTEE REPORT**

Mr. Speaker: Your Committee on Local Government, to which was referred House Bill 1627, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 2, between lines 18 and 19, begin a new line block indented and insert:

**"(5) A procedure for the dissolution of the district."**

Page 6, line 2, delete "An" and insert "**If not provided otherwise in the procedure for dissolution, an**".

Page 6, line 3, delete "July" and insert "**January**".

Page 6, line 3, after "of the" insert "**second**".

Page 6, line 3, delete "that" and insert "**after**".

(Reference is to HB 1627 as introduced.)

and when so amended that said bill do pass.

Committee Vote: yeas 12, nays 0.

STEVENSON, Chair

Report adopted.

**COMMITTEE REPORT**

Mr. Speaker: Your Committee on Local Government, to which was referred House Bill 1629, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill do pass.

Committee Vote: yeas 12, nays 0.

STEVENSON, Chair

Report adopted.

**COMMITTEE REPORT**

Mr. Speaker: Your Committee on Elections and Apportionment, to which was referred House Bill 1639, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 1, between the enacting clause and line 1, begin a new paragraph and insert:

**"SECTION 1. IC 3-5-2-50.4 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 50.4. "Voter's bill of rights" refers to the statement prescribed by the commission under IC 3-5-8.**

**SECTION 2. IC 3-5-8 IS ADDED TO THE INDIANA CODE AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]:**

**Chapter 8. The Voter's Bill of Rights**

**Sec. 1. The commission shall prescribe a statement of the rights of a voter in Indiana that shall be known as "the voter's bill of rights".**

**Sec. 2. The statement required by section 1 of this chapter must**

contain the following:

- (1) A statement of the qualifications that an individual must meet to vote in Indiana, including qualifications relating to registration.
- (2) A statement describing the circumstances that permit a voter who has moved from the precinct where the voter is registered to return to that precinct to vote.
- (3) A statement that an individual who meets the qualifications and circumstances listed in subdivisions (1) and (2) may vote in the election.
- (4) A statement describing how a voter who is challenged at the polls may be permitted to vote.
- (5) A statement informing the voter what assistance is available to assist the voter at the polls.
- (6) A statement informing the voter what circumstances will spoil the voter's ballot and the procedures available for the voter to request a new ballot.
- (7) A statement describing which voters will be permitted to vote at the closing of the polls.
- (8) Other information that the commission considers important for a voter to know.

Sec. 3. The commission may require a copy of the voter's bill of rights to be distributed with voter registration materials or other materials that are given to voters.

Sec. 4. The secretary of state or other state agency posting election information on the state's Internet site shall include the voter's bill of rights on the site.

Sec. 5. Not later than thirty (30) days before a primary, general, or municipal election, the secretary of state shall request Indiana news media to include a copy of the voter's bill of rights as part of election coverage or in public service announcements."

Page 1, line 16, after "(36) inches" insert "containing the voter's bill of rights."

Page 1, delete line 17.

Page 2, line 1, delete "summary" and insert "poster".

Page 2, delete lines 8 through 42.

Page 3, delete lines 1 through 16.

Renumber all SECTIONS consecutively.

(Reference is to HB 1639 as introduced.)

and when so amended that said bill do pass.

Committee Vote: yeas 10, nays 0.

KROMKOWSKI, Chair

Report adopted.

#### COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Policy, Ethics and Veterans Affairs, to which was referred House Bill 1863, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 1, line 4, after "minority" insert "**and women's**".

Page 1, line 5, strike "development" and insert "**enterprises**".

Page 1, line 6, after "minority" insert "**and women's**".

Page 1, line 7, strike "development" and insert "**enterprises**".

Page 2, line 23, delete "means a business that is one (1) of" and insert "**has the meaning set forth in IC 4-33-14-4.**".

Page 2, delete lines 24 through 40.

Page 3, line 1, after "minority" insert "**and women's**".

Page 3, line 2, strike "development." and insert "**enterprises.**".

Page 3, line 11, strike "racial".

Page 3, line 11, after "minority" insert "**and women's**".

Page 3, line 11, delete "business," and insert "**business enterprises.**".

Page 4, line 13, strike "businesses".

Page 4, line 15, strike "businesses".

Page 4, line 17, strike "businesses".

Page 4, line 21, strike "businesses".

Page 4, line 27, strike "businesses".

Page 4, delete lines 29 through 34, begin a new line block indented and insert:

"(7) Establish as a goal that at least five percent (5%) of state

contracts be let to racial minority businesses; annual goals:

(A) for the utilization of minority and women's business enterprises; and

(B) derived from a statistical analysis of utilization study of state contracts that must be updated every five (5) years."

Page 4, between lines 41 and 42, begin a new paragraph and insert: "SECTION 4. IC 4-13-16.5-3 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 3. (a) There is created in the Indiana department of administration a deputy commissioner for minority **and women's** business **enterprise** development. Upon consultation with the commission, the commissioner of the Indiana department of administration with the approval of the governor shall appoint an individual who possesses demonstrated capability in business or industry, especially in **racial** minority **or women's** business **enterprises**, to serve as deputy commissioner to work with the commission in the implementation of this chapter.

(b) The commissioner shall do the following:

(1) Identify and certify minority **and women's** business enterprises for state projects.

(2) Establish a central certification file.

(3) Periodically update the certification status of each minority **or women's** business enterprise.

(4) Monitor the progress in achieving the ~~goal~~ **goals** established under section 2(f)(7) of this chapter.

(5) Require state agencies to report on planned and actual participation of minority **and women's** business enterprises in contracts awarded by state agencies. The commissioner may exclude from the reports uncertified minority **and women's** business enterprises.

(6) Determine and define opportunities for minority **and women's** business participation in contracts awarded by state agencies.

(7) Implement programs initiated by the commission under section 2 of this chapter.

(8) Perform other duties as defined by the commission or by the commissioner of the Indiana department of administration."

Page 5, between lines 22 and 23, begin a new paragraph and insert: "SECTION 6. IC 4-13.5-1-8 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 8. (a) The commission

may employ architects, engineers, space planners, construction managers, and other professional persons it considers necessary to prepare complete plans and specifications necessary for bidding for construction. The commission shall consider economy of operation to the extent practicable in preparing and approving plans and specifications.

(b) The plans and specifications shall be presented for approval to:

(1) the department;

(2) if the facility is designed to house the supreme court or court of appeals, the administrator of the supreme court for approval by the courts; and

(3) if the facility is a correctional facility, the department of correction.

(c) After the plans and specifications have been approved by the commission under subsection (b), the commission shall advertise for and receive construction bids and award contracts to the best bidders in the same manner as required by law for the department.

(d) **With regard to participation by minority and women's business enterprises (as defined in IC 4-13-16.5-1 and IC 4-13-16.5-1.3), the commission shall act in the same manner as required by law for the department.**

SECTION 7. IC 4-30-1-2 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 2. In construing this article it is the intent of the general assembly that the following policies be carried out:

(1) That the lottery games be operated by the state lottery commission, which is created by IC 4-30-3 as a separate body politic and corporate from state government and should function as much as possible as an entrepreneurial business enterprise.

(2) That the general assembly recognizes that the operation of a lottery is a unique activity for state government and that

policies and procedures appropriate for the performance of other governmental functions are not necessarily appropriate for the operation of a lottery.

(3) That the lottery games be operated as a self-supporting revenue raising operation.

(4) That the commission be accountable to the general assembly and the people of Indiana through a system of audits and reports and by complying with financial disclosure, open meetings, and public record laws.

(5) That the commission ensure the equitable participation of racial minorities in all phases of the lottery, including instant game and on-line retailers and vendors. **The commission shall establish annual goals:**

**(A) for the utilization of minority and women's business enterprises (as defined in IC 4-13-16.5-1 and IC 4-13-16.5-1.3) in construction, professional services, other services, and supplies; and**

**(B) derived from a statistical analysis of utilization study of lottery contracts that must be updated every five (5) years.**

(6) That lottery game advertising and promotion shall be consistent with the dignity and integrity of the state.

SECTION 8. IC 4-33-14-5 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 5. (a) As used in this section, "goods and services" does not include the following:

(1) Utilities and taxes.

(2) Financing costs, mortgages, loans, or other debt.

(3) Medical insurance.

(4) Fees and payments to a parent or an affiliated company of the person holding an owner's license, other than fees and payments for goods and services supplied by nonaffiliated persons through an affiliated company for the use or benefit of the person holding the owner's license.

(5) Rents paid for real property or payments constituting the price of an interest in real property as a result of a real estate transaction.

(b) Notwithstanding any law or rule to the contrary, a person issued an owner's license shall establish annual goals: ~~of expending at least:~~

~~(1) ten percent (10%) of the dollar value of the licensee's contracts for goods and services with minority business enterprises; and~~

~~(2) five percent (5%) of the dollar value of the licensee's contracts for goods and services with women's business enterprises.~~

**(1) for the utilization of minority and women's business enterprises; and**

**(2) derived from a statistical analysis of utilization study of licensee contracts for goods and services that must be updated every five (5) years.**

A person holding an owner's license shall submit annually to the commission a report that includes the total dollar value of contracts awarded for goods or services and the percentage awarded to minority and women's business enterprises.

(c) A person holding an owner's license shall make a good faith effort to meet the requirements of this section and shall annually demonstrate to the commission that an effort was made to meet the requirements.

(d) A person holding an owner's license may fulfill not more than seventy percent (70%) of an obligation under this chapter by requiring a vendor to set aside a part of a contract for minority or women's business enterprises. Upon request, the licensee shall provide the commission with proof of the amount of the set aside."

Renumber all SECTIONS consecutively.

(Reference is to HB 1863 as introduced.)

and when so amended that said bill do pass.

Committee Vote: yeas 12, nays 0.

KUZMAN, Chair

Report adopted.

## COMMITTEE REPORT

Mr. Speaker: Your Committee on Local Government, to which was referred House Bill 1908, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 1, delete lines 5 through 7.

Page 2, between lines 17 and 18, begin a new paragraph and insert:

**"Passenger" means a frequent user of the commuter transportation system who can demonstrate an interest and familiarity with the commuter transportation system."**

Page 2, line 41, delete "commuter" and insert "passenger".

Page 3, line 1, delete "commuters" and insert "passengers".

Page 3, line 3, delete "commuter" and insert "passenger".

Page 3, line 10, delete "ten (10)".

Page 3, line 11, delete "jointly".

Page 3, line 12, after "." insert **"Each labor union representing employees of the district may submit one (1) name to be included on the list of names under this subdivision."**

Page 3, between lines 31 and 32, begin a new paragraph and insert:

**"(e) A member appointed under subsection (a)(4) or (a)(5) may not:**

**(1) vote on issues involving perceived or actual financial conflicts of interest, including personnel issues, collective bargaining, and assessment or levy of taxes; and**

**(2) participate in an executive session of the board under IC 5-14-1.5-6.1, on issues regarding:**

**(A) the discussion of strategy for:**

**(i) collective bargaining; and**

**(ii) the initiation of litigation or litigation that is either pending or has been threatened specifically in writing; as described in IC 5-14-1.5-6.1(b)(2); and**

**(B) the discussion of job performance evaluation of individual employees, except for a discussion of the salary, compensation, or benefits of employees during a budget process, as described in IC 5-14-1.5-6.1(b)(9).**

**(f) The members appointed under subsection (a)(4) and (a)(5) must reside in different counties."**

Page 3, line 37, delete "commuter" and insert "passenger".

Page 3, line 39, delete "commuter" and insert "passenger".

Page 3, line 42, delete "commuter" and insert "passenger".

Page 3, line 42, delete "commuters" and insert "passengers".

(Reference is to HB 1908 as introduced.)

and when so amended that said bill do pass.

Committee Vote: yeas 12, nays 0.

STEVENSON, Chair

Report adopted.

## COMMITTEE REPORT

Mr. Speaker: Your Committee on Environmental Affairs, to which was referred House Bill 1967, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 2, between lines 21 and 22, begin a new paragraph and insert:

**"Sec. 1. As used in this chapter, "facility" has the meaning set forth in 327 IAC 2-6.1-4(7), as in effect on January 1, 2001."**

Page 2, line 22, delete "Sec. 1." and insert "Sec. 2."

Page 2, line 29, delete "Sec. 2." and insert "Sec. 3."

Page 2, between lines 30 and 31, begin a new paragraph and insert:

**"Sec. 4. As used in this chapter, "mode of transportation" has the meaning set forth in 327 IAC 2-6.1-4(10), as in effect on January 1, 2001."**

Page 2, line 31, delete "Sec. 3." and insert "Sec. 5."

Page 2, line 33, delete "Sec. 4." and insert "Sec. 6."

Page 2, line 36, delete "and".

Page 2, line 38, delete "up." and insert "up;"

Page 2, between lines 38 and 39, begin a new line block indented and insert:

**"(3) with respect to the release or imminent release of hazardous materials at a facility, involves a quantity of hazardous materials that exceeds the spill quantities of hazardous materials that must be reported under 327**



**IAC 2-6.1-5, as in effect on January 1, 2001; and (4) with respect to the release or imminent release of hazardous materials from a mode of transportation, involves a quantity of hazardous materials that exceeds the spill quantities of hazardous materials that must be reported under 327 IAC 2-6.1-6, as in effect on January 1, 2001."**

Page 2, line 39, delete "Sec. 5." and insert "Sec. 7."

Page 2, line 40, delete "must" and insert "may".

Page 2, line 40, after "assistance" insert "provided, as determined from the state fire marshal's schedule of service charges issued under IC 36-8-12-16(e)".

Page 2, delete lines 41 through 42.

Page 3, delete lines 1 through 4.

Page 3, line 5, delete "Sec. 6." and insert "Sec. 8."

Page 3, delete lines 18 through 27, begin a new paragraph and insert:

**"Sec. 9. (a) A fire department may not bill under this chapter for services provided that duplicate services provided by another governmental entity.**

**(b) The responsible party billed for services under this chapter may elect to reimburse the fire department by providing replacement materials that are of equal or greater value than those expended by the fire department in responding to the emergency."**

Page 3, line 28, delete "Sec. 8." and insert "Sec. 10."

Page 3, line 32, delete "Sec. 9." and insert "Sec. 11."

(Reference is to HB 1967 as introduced.)

and when so amended that said bill do pass.

Committee Vote: yeas 11, nays 0.

WEINZAPFEL, Chair

Report adopted.

#### COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Policy, Ethics and Veterans Affairs, to which was referred House Bill 2037, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 2, between lines 7 and 8, begin a new paragraph and insert:

**"SECTION 2. IC 7.1-3-12-5, AS AMENDED BY P.L.177-1999, SECTION 7, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 5. (a) The holder of a farm winery permit:**

(1) is entitled to manufacture wine and to bottle wine produced by the permit holder's farm winery;

(2) is entitled to serve complimentary samples of the winery's wine on the licensed premises;

(3) is entitled to sell the winery's wine on the licensed premises to consumers either by the glass, or by the bottle, or both;

(4) is entitled to sell wine by the bottle or by the case to a person who is the holder of a permit to sell wine at either wholesale or retail;

(5) is exempt from the provisions of IC 7.1-3-14;

(6) is entitled to advertise the name and address of any retailer or dealer who sells wine produced by the permit holder's winery; and

(7) for wine described in IC 7.1-1-2-3(a)(4):

(A) may allow transportation to and consumption of the wine on the licensed premises; and

(B) may not sell, offer to sell, or allow the sale of the wine on the licensed premises.

(b) With the approval of the commission, a holder of a permit under this chapter may conduct business at a second location that is separate from the winery. At the second location, the holder of a permit may conduct any business that is authorized at the first location, except for the manufacturing or bottling of wine.

(c) With the approval of the commission, a holder of a permit under this chapter may, individually or with other permit holders under this chapter, participate in a trade show or an exposition at which products of each permit holder participant are displayed, promoted, and sold. The commission may not grant approval under this subsection to a holder of a permit under this chapter

(1) more than three (3) times in a calendar year; and

(2) for more than three (3) days for each event nine (9) days in a calendar year."

Renumber all SECTIONS consecutively.

(Reference is to HB 2037 as introduced.)

and when so amended that said bill do pass.

Committee Vote: yeas 13, nays 1.

KUZMAN, Chair

Report adopted.

#### ENGROSSED HOUSE BILLS ON THIRD READING

##### Engrossed House Bill 1815

Representative Tincher called down Engrossed House Bill 1815 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning pensions.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 106: yeas 76, nays 2. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsors: Senators Ford, Hume, Gard, and Craycraft.

##### Engrossed House Bill 1824

Representative Weinzapfel called down Engrossed House Bill 1824 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning environmental law.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 107: yeas 92, nays 0. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsor: Senator Gard.

##### Engrossed House Bill 1808

Representative Mellinger called down Engrossed House Bill 1808 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning criminal law and procedure.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 108: yeas 94, nays 0. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsor: Senator Ford.

##### Engrossed House Bill 1796

Representative Cheney called down Engrossed House Bill 1796 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning labor and industrial safety.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 109: yeas 56, nays 37. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsors: Senators .

**Engrossed House Bill 1789**

Representative Liggett called down Engrossed House Bill 1789 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning state offices and administration.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 110: yeas 81, nays 12. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsors: Senators Harrison and Craycraft.

**Engrossed House Bill 1752**

Representative Pond called down Engrossed House Bill 1752 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning motor vehicles.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 111: yeas 93, nays 0. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsors: Senators Wheeler and Lewis.

**Engrossed House Bill 1742**

Representative Kruzan called down Engrossed House Bill 1742 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning controlled substances.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 112: yeas 91, nays 2. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsors: Senators .

**Engrossed House Bill 1678**

Representative Crawford called down Engrossed House Bill 1678 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning Medicaid.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 113: yeas 93, nays 0. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsors: Senators Miller and Simpson.

**Engrossed House Bill 1553**

Representative L. Lawson called down Engrossed House Bill 1553 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning labor and industrial safety.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 114: yeas 93, nays 0. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsor: Senator Harrison.

**Engrossed House Bill 1389**

Representative Fry called down Engrossed House Bill 1389 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning transportation.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 115: yeas 75, nays 17. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsors: Senators Reigsecker, Zakas, Alexa, and R. Meeks.

**Engrossed House Bill 1504**

Representative Ayres called down Engrossed House Bill 1504 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning local government.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 116: yeas 90, nays 0. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsors: Senators Skillman and Antich.

**Engrossed House Bill 1361**

Pursuant to House Rule 146.3, the author of Engrossed House Bill 1361, Representative Moses, granted consent to the coauthor, Representative Buell, to call the bill down for third reading. Representative Buell called down Engrossed House Bill 1361 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning state and local administration.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 117: yeas 89, nays 0. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsors: Senators Miller and Howard.

**Engrossed House Bill 1410**

Representative T. Adams called down Engrossed House Bill 1410 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning taxation.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 118: yeas 90, nays 0. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsors: Senators Craycraft and Long.

**Engrossed House Bill 1278**

Representative Cheney called down Engrossed House Bill 1278 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning professions and occupations.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 119: yeas 58, nays 28. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act?

There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsor: Senator R. Meeks.

The Speaker Pro Tempore yielded the gavel to the Speaker.

### Engrossed House Bill 1186

Representative Day called down Engrossed House Bill 1186 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning health and to make an appropriation.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 120: yeas 86, nays 0. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsors: Senators Johnson and Simpson.

### Engrossed House Bill 1084

Representative Cheney called down Engrossed House Bill 1084 for third reading:

A BILL FOR AN ACT to amend the Indiana Code concerning family law and juvenile law.

The bill was read a third time by sections and placed upon its passage. The question was, Shall the bill pass?

Roll Call 121: yeas 87, nays 0. The bill was declared passed. The question was, Shall the title of the bill remain the title of the act? There being no objection, it was so ordered. The Clerk was directed to inform the Senate of the passage of the bill. Senate sponsors: Senators Ford, Lanane, and Kenley.

## REPORTS FROM COMMITTEES

### COMMITTEE REPORT

Mr. Speaker: Your Committee on Ways and Means, to which was referred House Bill 1111, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Delete the title and insert the following:

"A BILL FOR AN ACT to amend the Indiana Code concerning education."

Page 2, delete lines 16 through 21.

(Reference is to HB 1111 as introduced.)

and when so amended that said bill do pass.

Committee Vote: yeas 20, nays 0.

BAUER, Chair

Report adopted.

### COMMITTEE REPORT

Mr. Speaker: Your Committee on Ways and Means, to which was referred House Bill 1185, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 2, delete line 42.

Page 3, delete lines 1 through 12.

Page 3, line 36, delete "15" and insert "**31**".

Page 3, line 39, delete "thirty (30)" and insert "**forty-five (45)**".

Page 5, line 8, delete "jointly apply to administer this program or".

Page 6, delete lines 27 through 30.

Page 6, line 33, delete "2005" and insert "**2003**".

Renummer all SECTIONS consecutively.

(Reference is to HB 1185 as introduced.)

and when so amended that said bill do pass.

Committee Vote: yeas 22, nays 0.

BAUER, Chair

Report adopted.

### COMMITTEE REPORT

Mr. Speaker: Your Committee on Ways and Means, to which was referred House Bill 1360, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 1, between the enacting clause and line 1, insert the following:

"SECTION 1. IC 4-12-5-3, AS ADDED BY P.L.21-2000, SECTION 3, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 3. (a) The Indiana health care trust fund is established for the purpose of promoting the health of the citizens of Indiana. The fund consists of:

(1) amounts, if any, that another statute requires to be distributed to the fund from the Indiana tobacco master settlement agreement fund;

(2) appropriations to the fund from other sources;

(3) grants, gifts, and donations intended for deposit in the fund, **including amounts designated to the Barry J. Brumer Cancer Research account under IC 6-8.1-9-5;** and

(4) interest that accrues from money in the fund.

(b) The fund shall be administered by the budget agency. Notwithstanding IC 5-13, the treasurer of state shall invest the money in the fund not currently needed to meet the obligations of the fund in the same manner as money is invested by the public employees retirement fund under IC 5-10.3-5. The treasurer of state may contract with investment management professionals, investment advisors, and legal counsel to assist in the management of the fund and may pay the state expenses incurred under those contracts. Money in the fund at the end of the state fiscal year does not revert to the state general fund."

Page 2, line 23, after "(a)" insert "**There is established the Barry J. Brumer cancer research account within the Indiana health care trust fund.**

(b)".

Page 2, line 28, delete "Indiana".

Page 2, line 29, delete "health care trust fund under IC 4-12-5 for cancer research." and insert "**the Barry J. Brumer cancer research account.**"

Page 2, line 30, delete "Indiana health care trust".

Page 2, line 31, delete "fund for cancer research" and insert "**Barry J. Brumer cancer research account.**"

Page 2, line 33, delete "Indiana health care trust fund for cancer".

Page 2, line 34, delete "research." and insert "**Barry J. Brumer cancer research account.**"

Page 2, line 35, delete "(b)" and insert "(c)".

Page 2, line 40, delete "Indiana health care trust fund".

Page 2, line 41, delete "under IC 4-12-5 for cancer research." and insert "**Barry J. Brumer cancer research account.**"

Page 2, line 42, delete "health care trust fund for cancer research" and insert "**Barry J. Brumer cancer research account.**"

Page 3, line 2, after "designated to" insert "**the Barry J. Brumer cancer research account.**"

Page 3, delete line 3.

Page 3, line 4, delete "(c)" and insert "(d)".

Page 3, line 5, delete "health care trust fund for cancer research" and insert "**Barry J. Brumer cancer research account.**"

Page 3, line 12, delete "Indiana health care trust fund for cancer".

Page 3, line 13, delete "research." and insert "**Barry J. Brumer cancer research account.**"

Page 3, line 14, delete "(d)" and insert "(e)".

Page 3, line 16, delete "Indiana health care trust fund and shall be" and insert "**Barry J. Brumer cancer research account.**"

Renummer all SECTIONS consecutively.

(Reference is to HB 1360 as introduced.) and when so amended that said bill do pass.

Committee Vote: yeas 22, nays 0.

BAUER, Chair

Report adopted.

## COMMITTEE REPORT

Mr. Speaker: Your Committee on Ways and Means, to which was referred House Bill 1401, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill do pass.

Committee Vote: yeas 22, nays 0.

BAUER, Chair

Report adopted.

## COMMITTEE REPORT

Mr. Speaker: Your Committee on Labor and Employment, to which was referred House Bill 1452, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 1, line 4, after "Rape" insert ", **Criminal Deviate Conduct, Sexual Battery, Sexual Misconduct With a Minor,**".

Page 1, line 8, after "," insert "**solely**".

Page 1, line 11, delete "rape." and insert "**rape (IC 35-42-4-1), criminal deviate conduct (IC 35-42-4-2), sexual battery (IC 35-42-4-8), or sexual misconduct with a minor (IC 35-42-4-9).**".

Page 1, line 12, delete "rape." and insert "**rape (IC 35-42-4-1), criminal deviate conduct (IC 35-42-4-2), sexual battery (IC 35-42-4-8), or sexual misconduct with a minor (IC 35-42-4-9).**".

Page 2, line 8, delete "Award punitive damages.".

Page 2, line 9, delete "(4)".

Page 2, run in lines 8 through 9.

(Reference is to HB 1452 as introduced.)

and when so amended that said bill do pass.

Committee Vote: yeas 13, nays 0.

LIGGETT, Chair

Report adopted.

## COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred House Bill 1459, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 1, line 3, delete "a:" and insert ":".

Page 1, line 4, after "(1)" insert "**a**".

Page 1, line 4, delete "or".

Page 1, line 5, after "(2)", insert "**a**".

Page 1, line 5, delete "." and insert ";".

Page 1, between lines 5 and 6, begin a new line block indented and insert:

**"(3) an advanced practice nurse licensed under IC 25-23;**

**(4) a chiropractor licensed under IC 25-10;**

**(5) a podiatrist licensed under IC 25-29;**

**(6) an optometrist licensed under IC 25-24; or**

**(7) a clinical psychologist licensed under IC 25-33."**

Page 1, line 11, delete "physician" and insert "**provider**".

Page 1, line 12, delete "ninety (90)" and insert "**forty-five (45)**".

Page 1, line 14, delete "physician or dentist" and insert "**provider**".

Page 1, line 14, after "who" insert ":".

**(1)".**

Page 1, line 15, after "(c)", insert ";".

Page 1, line 15, after "and" begin a new line block indented and insert:

**"(2) informs the insurer in writing within fifteen (15) days after receiving the notice in subsection (c) that the provider".**

Page 1, line 15, after "amendment" insert ";".

Page 1, line 15, before "may" begin a new line blocked left.

Page 1, line 15, delete "cease" and insert "**terminate the contract**".

Page 1, line 16, delete "on the".

Page 1, line 17, delete "effective date of the amendment".

Page 1, line 17, after "penalty" insert "**ninety (90) days after the insurer has received written notice from the provider that the provider does not approve the amendment**".

Page 2, between lines 2 and 3, begin a new paragraph and insert:

**"(f) This section does not apply to an amendment to a provider**

**contract that is required to comply with a state or federal law."**

Page 2, line 12, delete "ninety (90)" and insert "**forty-five (45)**".

Page 2, line 14, after "who" insert ":".

**(1)".**

Page 2, line 15, after "(a)", insert ";".

Page 2, line 15, after "and" begin a new line block indented and insert:

**"(2) informs the health maintenance organization or limited service health maintenance organization in writing within fifteen (15) days after receiving the notice in subsection (a) that the participating provider".**

Page 2, line 16, delete "cease" and insert "**terminate the contract**".

Page 2, line 16, delete "on the".

Page 2, line 17, delete "effective date of the amendment".

Page 2, line 17, after "penalty" insert "**ninety (90) days after the health maintenance organization or limited service health maintenance organization has received written notice from the provider that the provider does not approve the amendment**".

Page 2, between lines 19 and 20, begin a new paragraph and insert:

**"(d) This section does not apply to an amendment to a contract with a participating provider that is required to comply with a state or federal law."**

(Reference is to HB 1459 as introduced.)

and when so amended that said bill do pass.

Committee Vote: yeas 11, nays 0.

C. BROWN, Chair

Report adopted.

## COMMITTEE REPORT

Mr. Speaker: Your Committee on Education, to which was referred House Bill 1469, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 2, line 24, delete "Five (5)" and insert "**Four (4)**".

Page 2, line 24, delete "school employees" and insert "**teachers**".

Page 2, line 25, delete "20-7.5-1-2)." and insert "**20-6.1-1-8) who are familiar with and experienced in the use of technology in educational settings."**

Page 2, between lines 25 and 26, begin a new line block indented and insert:

**"(8) One (1) member who is a building administrator who is familiar with and experienced in the use of technology in educational settings."**

(Reference is to HB 1469 as introduced.)

and when so amended that said bill do pass.

Committee Vote: yeas 13, nays 0.

PORTER, Chair

Report adopted.

## COMMITTEE REPORT

Mr. Speaker: Your Committee on Local Government, to which was referred House Bill 1484, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 1, delete lines 16 through 17, begin a new paragraph and insert:

**"SECTION 2. IC 36-2-11-16 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 16. (a) This section does not apply to:**

**(1) an instrument executed before November 4, 1943;**

**(2) a judgment, order, or writ of a court;**

**(3) a will or death certificate; or**

**(4) an instrument executed or acknowledged outside Indiana.**

**(b) Whenever this section prescribes that the name of a person be printed, typewritten, or stamped immediately beneath his signature, the signature must be written on the instrument, directly preceding the printed, typewritten, or stamped name, and may not be superimposed on that name so as to render either illegible. However, the instrument may be received for record if the name and signature are, in the discretion of the county recorder, placed on the instrument**

so as to render the connection between the two apparent.

(c) The recorder may receive for record an instrument only if:

- (1) the name of each person who executed the instrument is legibly printed, typewritten, or stamped immediately beneath his signature or the signature itself is printed, typewritten, or stamped;
- (2) the name of each witness to the instrument is legibly printed, typewritten, or stamped immediately beneath his signature or the signature itself is printed, typewritten, or stamped;
- (3) the name of each notary public whose signature appears on the instrument is legibly printed, typewritten, or stamped immediately beneath his signature or the signature itself is printed, typewritten, or stamped; and
- (4) the name of each person who executed the instrument appears identically in the body of the instrument, in the acknowledgment or jurat, in his signature, and beneath his signature;

or if subsection (d) is complied with.

(d) The recorder may receive for record an instrument that does not comply with subsection (c) if:

- (1) a printed or typewritten affidavit of a person with personal knowledge of the facts is recorded with the instrument;
- (2) the affidavit complies with this section;
- (3) the affidavit states the correct name of a person, if any, whose signature cannot be identified or whose name is not printed, typewritten, or stamped on the instrument as prescribed by this section; and
- (4) when the instrument does not comply with subsection (c)(4), the affidavit states the correct name of the person and states that each of the names used in the instrument refers to the person.

(e) The recorder may record a **document presented for recording** or a copy produced by a photographic process of ~~any~~ the document presented for recording if:

- (1) the document complies with other statutory recording requirements; and
- (2) the **document or** copy **is will produce** a clear ~~concise~~, and unobstructed copy.

All copies accepted for recording shall be marked as copies by the recorder.

(f) An instrument, **document, or copy** received and recorded by a county recorder is conclusively presumed to comply with this section."

Delete page 2.

(Reference is to HB 1484 as introduced.)

and when so amended that said bill do pass.

Committee Vote: yeas 12, nays 0.

STEVENSON, Chair

Report adopted.

#### COMMITTEE REPORT

Mr. Speaker: Your Committee on Ways and Means, to which was referred House Bill 1647, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 1, between lines 5 and 6, begin a new paragraph and insert:

**"(b) The office of Medicaid policy and planning shall seek approval under 42 U.S.C. 1396 et seq. from the federal Health Care Financing Administration to amend the waiver to:**

**(1) provide coverage for care provided by a treatment team, which must include a lead therapist who:**

- (A) is licensed as a psychologist under IC 25-33 or as a psychiatrist under IC 25-22.5;**
- (B) has completed one thousand five hundred (1,500) hours of training or supervised experience in the application of applied behavior analysis or an equivalent behavior modification theory for children with a pervasive developmental disorder; and**
- (C) has at least two (2) years experience as an independent practitioner and as a supervisor of less experienced**

**clinicians; and**

**(2) increase by at least two hundred (200) the total number of waiver slots for individuals who are eligible for a waiver and who would otherwise require a level of care in an intermediate care facility for the mentally retarded (as defined in 42 U.S.C. 1396d(d)) or a nursing facility (as defined in 42 U.S.C. 1396r(a)).**

**(c) The office of Medicaid policy and planning shall apply before September 1, 2001, for approval from the federal Health Care Financing Administration to amend the waiver to implement this SECTION.**

**(d) The office of Medicaid policy and planning may not implement the changes specified under subsection (b) until the office of Medicaid policy and planning files an affidavit with the governor attesting that the federal Health Care Financing Administration approves the changes in the waiver requested by the office of Medicaid policy and planning under this SECTION. The office shall file the affidavit under this subsection not later than five (5) days after the office is notified that the waiver is approved.**

**(e) The office of Medicaid policy and planning shall adopt rules under IC 4-22-2 necessary to implement this SECTION."**

Page 1, line 6, delete "(b)" and insert "(f)".

Page 1, line 16, delete "(c)" and insert "(g)".

(Reference is to HB 1647 as introduced.)

and when so amended that said bill do pass.

Committee Vote: yeas 23, nays 0.

BAUER, Chair

Report adopted.

#### COMMITTEE REPORT

Mr. Speaker: Your Committee on Ways and Means, to which was referred House Bill 1727, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 4, between lines 10 and 11, begin a new paragraph and insert:

**"SECTION 3. IC 12-7-2-24.5 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JANUARY 1, 2002]: Sec. 24.5. "Caretaker relative" for purposes of IC 12-17.7, has the meaning set forth in IC 12-17.7-1-2."**

Page 4, between lines 16 and 17, begin a new paragraph and insert:

**"SECTION 4. IC 12-7-2-69 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 69. (a) "Division", except as provided in subsections (b) and (c), refers to any of the following:**

**(1) The division of disability, aging, and rehabilitative services established by IC 12-9-1-1.**

**(2) The division of family and children established by IC 12-13-1-1.**

**(3) The division of mental health established by IC 12-21-1-1.**

**(b) The term refers to the following:**

**(1) For purposes of the following statutes, the division of disability, aging, and rehabilitative services established by IC 12-9-1-1:**

**(A) IC 12-9.**

**(B) IC 12-10.**

**(C) IC 12-11.**

**(D) IC 12-12.**

**(2) For purposes of the following statutes, the division of family and children established by IC 12-13-1-1:**

**(A) IC 12-13.**

**(B) IC 12-14.**

**(C) IC 12-15.**

**(D) IC 12-16.**

**(E) IC 12-16.1.**

**(F) IC 12-17.**

**(F) (G) IC 12-17.2.**

**(G) (H) IC 12-17.4.**

**(H) (I) IC 12-18.**

**(I) (J) IC 12-19.**

**(J) (K) IC 12-20.**

**(3) For purposes of the following statutes, the division of**

mental health established by IC 12-21-1-1:

- (A) IC 12-21.
- (B) IC 12-22.
- (C) IC 12-23.
- (D) IC 12-25.

(c) With respect to a particular state institution, the term refers to the division whose director has administrative control of and responsibility for the state institution.

(d) For purposes of IC 12-24, IC 12-26, and IC 12-27, the term refers to the division whose director has administrative control of and responsibility for the appropriate state institution.

SECTION 5. IC 12-7-2-76, AS AMENDED BY P.L.128-1999, SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JUNE 30, 2002]: Sec. 76. (a) "Eligible individual", for purposes of IC 12-10-10, has the meaning set forth in IC 12-10-10-4.

(b) "Eligible individual" has the meaning set forth in IC 12-14-18-1.5 for purposes of the following:

- (1) IC 12-10-6.
- (2) IC 12-14-2.
- (3) IC 12-14-18.
- (4) IC 12-14-19.
- (5) IC 12-15-2.
- (6) IC 12-15-3.
- ~~(7) IC 12-16-3.~~
- ~~(8) (7) IC 12-17-1.~~
- ~~(9) (8) IC 12-20-5.5."~~

Page 4, between lines 36 and 37, begin a new paragraph and insert: "SECTION 7. IC 12-7-2-104.5, AS ADDED BY P.L.128-1999, SECTION 5, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JUNE 30, 2002]: Sec. 104.5. "Holocaust victim's settlement payment" has the meaning set forth in IC 12-14-18-1.7 for purposes of the following:

- (1) IC 12-10-6.
- (2) IC 12-14-2
- (3) IC 12-14-18.
- (4) IC 12-14-19.
- (5) IC 12-15-2.
- (6) IC 12-15-3.
- ~~(7) IC 12-16-3.~~
- ~~(8) (7) IC 12-17-1.~~
- ~~(9) (8) IC 12-20-5.5.~~

SECTION 8. IC 12-7-2-110, AS AMENDED BY P.L.142-2000, SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 110. "Hospital" means the following:

- (1) For purposes of IC 12-15-11.5, the meaning set forth in IC 12-15-11.5-1.
- (2) For purposes of IC 12-15-18, the meaning set forth in IC 12-15-18-2.
- (3) For purposes of ~~IC 12-16~~, ~~except IC 12-16-1~~, **IC 12-16.1**, the term refers to a hospital licensed under IC 16-21.

SECTION 9. IC 12-7-2-118.1 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JUNE 30, 2002]: Sec. 118.1. "Inpatient days", for purposes of **IC 12-16.1-8**, has the meaning set forth in **IC 12-16.1-8-1**.

SECTION 10. IC 12-7-2-131.3 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 131.3. "Minimum data set", for purposes of **IC 12-15-41**, has the meaning set forth in **IC 12-15-41-1**."

Page 5, between lines 41 and 42, begin a new paragraph and insert: "SECTION 10. IC 12-7-2-164 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]: Sec. 164. "Resident" has the following meaning:

- (1) For purposes of IC 12-10-15, the meaning set forth in IC 12-10-15-5.
- (2) For purposes of ~~IC 12-16~~, ~~except IC 12-16-1~~, **IC 12-16.1**, an individual who has actually resided in Indiana for at least ninety (90) days.
- (3) For purposes of IC 12-20-8, the meaning set forth in IC 12-20-8-1.
- (4) For purposes of IC 12-24-5, the meaning set forth in IC 12-24-5-1.

SECTION 11. IC 12-10-12-27 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 27. (a) **Except as provided in subsection (b)**, the agency shall, subject to the approval of the division, designate at least one (1) individual who may authorize temporary admittance to a nursing facility under

~~(1) subsection (b); and~~

~~(2) sections 28, 30, and 31 of this chapter without the approval required under this chapter.~~

(b) An individual designated under subsection (a) may **not** authorize temporary admittance to a nursing home **under subsection (a)** for a **resident nonresident** of Indiana. ~~if the resident:~~

- ~~(1) has received treatment from and is being discharged from a hospital that is located in a state other than Indiana; and~~
- ~~(2) will be participating in preadmission screening under this chapter.~~

~~(c) Notwithstanding a rule adopted under section 12 of this chapter, a screening team appointed to screen a nonresident under this section must:~~

- ~~(1) conduct its assessment under section 16 of this chapter; and~~
- ~~(2) report its findings;~~

~~within ten (10) days after its appointment.~~

SECTION 12. IC 12-15-1-16.5 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 16.5. Each state department or agency and each local governmental unit shall cooperate with the office who shall conduct a study to examine means in which to cover Medicaid eligible care provided by the departments, agencies, or units with state or local funding."

Page 6, line 2, delete "JANUARY 1, 2001" and insert "JULY 1, 2000".

Page 6, line 6, delete "for the period beginning January 1, 2001, through June 30,".

Page 6, line 7, delete "2001, and for".

Page 6, line 7, after "1997," delete "2001" and insert "2000".

Page 6, line 21, delete "For the period beginning January 1, 2001,".

Page 6, delete line 22.

Page 6, line 23, delete "June 30, 2001, the" and insert "The".

Page 6, line 23, delete "calculate" and insert "identify".

Page 6, run in lines 21 and 23.

Page 6, line 25, delete "IC 16-22 or" and insert "**IC 16-22-2, IC 16-22-8, and**".

Page 6, line 26, delete "calculated" and insert "**identified**".

Page 6, line 27, delete ", for the period beginning".

Page 6, delete line 28.

Page 6, line 29, delete "year ending after June 30, 2001,".

Page 6, run in lines 27 and 29.

Page 6, line 31, delete "IC 16-22 or" and insert "**IC 16-22-2, IC 16-22-8, and**".

Page 6, line 34, delete "through" and insert "**and ending**".

Page 6, line 40, after "Subtract the" insert "**amount calculated under**".

Page 6, line 40, after "TWO" delete "amount".

Page 6, line 40, after "from the" insert "**amount calculated under**".

Page 6, line 41, delete "amount".

Page 6, between lines 41 and 42, begin a new line block indented and insert:

**"STEP FIVE: From the amount calculated under STEP FOUR, distribute to a hospital established and operated under IC 16-22-8 an amount equal to one hundred percent (100%) of the difference between:**

**(A) the aggregate payments for covered services made under this article to the hospital, excluding payments under IC 12-15-16 and IC 12-15-19; and**

**(B) a reasonable estimate of the amount that would have been paid for the services described in subdivision (1) under Medicare payment principles.**

**The actual distribution of the amount calculated under this STEP shall be made pursuant to the terms and conditions provided for the hospital in the state plan for medical assistance.**

**STEP SIX: Subtract the amount calculated under STEP FIVE from the amount calculated under STEP FOUR."**

Page 6, line 42, delete "FIVE" and insert "SEVEN".  
 Page 7, line 1, delete "FOUR" and insert "SIX".  
 Page 7, line 6, reset in roman "each".  
 Page 7, line 6, delete "the period".  
 Page 7, delete line 7.  
 Page 7, line 8, delete "close of a".  
 Page 7, line 8, delete "ending after June 30, 2001. Payment for".  
 Page 7, delete line 9.  
 Page 7, line 10, delete "be made before December 31, 2001." and insert **"Payment for a state fiscal year ending after June 30, 2001, shall be made before December 31 following the state fiscal year's end."**  
 Page 7, line 13, delete "IC 16-22" and insert **"IC 16-22-2"**.  
 Page 7, line 18, delete "the period beginning January 1, 2001, through June 30,".  
 Page 7, line 19, delete "2001, and after the close of".  
 Page 7, line 19, delete "ending after June" and insert ".".  
 Page 7, line 20, delete "30, 2001".  
 Page 7, line 24, after "fund" insert **"the state's share of payments under this section and"**.  
 Page 7, line 25, after "IC 12-15-20-2(2)" insert ",".  
 Page 7, line 25, after "and" insert **"payments for the uninsured parents program under"**.  
 Page 7, line 29, delete "FIVE" and insert "SEVEN".  
 Page 7, between lines 38 and 39, begin a new paragraph and insert:  
**"(g) For the state fiscal year beginning July 1, 2000, and ending June 30, 2001, the amount calculated under STEP THREE of subsection (b) shall be adjusted to account for the portion of the state fiscal year prior to the effective date of the federal regulation establishing the Medicaid upper payment limit for non-state government owned or operated hospitals at one hundred fifty percent (150%) of Medicare reimbursement rates.**  
**(h) For purposes of calculating the amount under STEP THREE of subsection (b), the amount attributable to the period of the state fiscal year described in subsection (g) shall be the maximum payment amount available without exceeding the Medicaid upper payment limit applicable for non-state owned or operated hospitals for that period."**  
 Replace the effective date in SECTION 8 with "[EFFECTIVE JULY 1, 2001]".  
 Page 8, line 7, delete "." and insert **"and funds available under IC 12-16-14.1-3."**  
 Page 9, between lines 8 and 9, begin a new paragraph and insert:  
**"SECTION 12. IC 12-15-15-12 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 12. The office may not increase the base amount used to calculate reimbursement rates for inpatient and outpatient hospital services over the base amount used by the office on January 1, 2001."**  
 Page 9, between lines 40 and 41, begin a new paragraph and insert:  
**"SECTION 18. IC 12-15-16-3, AS AMENDED BY P.L.113-2000, SECTION 7, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JUNE 30, 2002]: Sec. 3. (a) For purposes of disproportionate share eligibility, a provider's low income utilization rate is the sum of the following, based on the most recent year for which an audited cost report is on file with the office:**  
 (1) A fraction (expressed as a percentage) for which:  
 (A) the numerator is the sum of:  
 (i) the total Medicaid patient revenues paid to the provider; plus  
 (ii) the amount of the cash subsidies received directly from state and local governments, including payments made under the hospital care for the indigent program (IC 12-16-2) **(before its repeal); and**  
 (B) the denominator is the total amount of the provider's patient revenues paid to the provider, including cash subsidies; and  
 (2) A fraction (expressed as a percentage) for which:  
 (A) the numerator is the total amount of the provider's charges for inpatient services that are attributable to care

provided to individuals who have no source of payment; and  
 (B) the denominator is the total amount of charges for inpatient services.

(b) The numerator in subsection (a)(1)(A) does not include contractual allowances and discounts other than for indigent patients not eligible for Medicaid."

Page 12, line 26, delete "JANUARY 1, 2001" and insert "JULY 1, 2000".

Page 12, line 42, delete "for the period before January 1, 2001," and insert **"for the state fiscal years ending on or before June 30, 2000"**.

Page 13, delete lines 4 through 28.

Page 13, line 29, delete "(C)" and insert "(B)".

Page 13, line 31, delete "2001" and insert **"2000"**.

Page 13, line 35, delete "IC 12-15-15-1.1" and insert **"IC 12-15-15-1.1(b)"**.

Page 14, line 7, delete "clauses" and insert **"clause"**.

Page 14, line 7, delete "and (C)".

Page 14, line 9, delete "disproportionate" and insert **"Medicaid add-on payments to hospitals licensed under IC 16-21 pursuant to a payment methodology developed by the office."**

Page 14, delete line 10, begin a new paragraph and insert:

**"SECTION 13. IC 12-15-41 IS ADDED TO THE INDIANA CODE AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]:**

**Chapter 41. Annual Review of Medicaid Nursing Facility Residents**

**Sec. 1. "Minimum data set" or "MDS" means a core set of screening and assessment elements, including common definitions and coding categories, used as:**

(1) a comprehensive assessment for all residents of long term care facilities certified to participate in the Medicaid program; and

(2) a standardized communication about resident problems, strengths, and conditions within the facilities, between facilities, and between facilities and outside agencies.

**Sec. 2. A nursing facility certified to provide nursing facility care to Medicaid recipients shall submit to the office annually minimum data set (MDS) information for each of its Medicaid residents.**

**Sec. 3. (a) The office or the office's designated contractor shall evaluate the MDS information submitted for each Medicaid resident. The evaluation must consist of an assessment of the following:**

(1) The individual's medical needs.

(2) The availability of services, other than services provided in a nursing facility, that are appropriate to the individual's needs.

(3) The cost effectiveness of providing services appropriate to the individual's needs that are provided outside of, rather than within, a nursing facility.

**(b) The assessment must be conducted in accordance with rules adopted under IC 4-22-2 by the office.**

**Sec. 4. If the office determines under section 3 that an individual's needs could be met in a setting other than a nursing facility and in a cost effective manner, the office shall counsel the individual and provide the individual with written notice containing the following:**

(1) The reasons for the office's determination.

(2) A detailed description of services available to the individual that, if used by the individual, make the continued placement of the individual in a nursing facility inappropriate."

Page 14, line 16, delete "2001" and insert **"2002"**.

Page 16, line 22, delete "under" and insert **"by"**.

Page 16, line 23, delete ":" and insert ",".

Page 16, line 24, delete "(1)".

Page 16, line 27, delete ";" and insert ".".

Page 16, run in lines 23 through 27.

Page 16, delete line 28.

Page 16, between lines 28 and 29, begin a new paragraph and insert:

**"SECTION 19. IC 12-16.1 IS ADDED TO THE INDIANA CODE AS A NEW ARTICLE TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2003]:**

**ARTICLE 16.1. HOSPITAL CARE FOR THE INDIGENT**

**Chapter 1. Applicability**

Sec. 1. This article applies only if the office of the uninsured parents program established by IC 12-17-7-2-1 does not implement an uninsured parents program before July 1, 2003.

**Chapter 2. Administration and General Provisions**

Sec. 1. The division shall administer the hospital care for the indigent program under this article.

Sec. 2. The division shall adopt necessary forms to be used by the patients, hospitals, physicians, and county offices in carrying out the hospital care for the indigent program.

Sec. 3. The following persons have the same rights and obligations with respect to the hospital care for the indigent program as the persons have with respect to the Medicaid program under IC 12-15-8 and IC 12-15-29:

- (1) The division.
- (2) Applicants and recipients of assistance.
- (3) Insurers.
- (4) Persons against whom applicants and recipients of assistance have claims.
- (5) The office of Medicaid policy and planning.

Sec. 4. To the extent permitted under federal statutes or regulations, patient days for patients under the hospital care for the indigent program shall be included in calculating allowable disproportionate share additional payments under 42 U.S.C. 1395ww(d).

Sec. 5. The hospital care for the indigent program does not apply to inmates and patients of institutions of the department of correction, the state department of health, the division of mental health, or the division of disability, aging, and rehabilitative services.

**Chapter 3. Eligibility for Assistance**

Sec. 1. (a) An Indiana resident who meets the income and resource standards established by the division under section 3 of this chapter is eligible for assistance to pay for any part of the cost of care provided in a hospital in Indiana that was necessitated after the onset of a medical condition that was manifested by symptoms of sufficient severity that the absence of immediate medical attention would probably result in any of the following:

- (1) Placing the individual's life in jeopardy.
- (2) Serious impairment to bodily functions.
- (3) Serious dysfunction of a bodily organ or part.

(b) A qualified resident is also eligible for assistance to pay for the part of the cost of care that is a direct consequence of the medical condition that necessitated the emergency care.

Sec. 2. (a) An individual who is not an Indiana resident is eligible for assistance to pay for the part of the cost of care provided in a hospital in Indiana that was necessitated after the onset of a medical condition that was manifested by symptoms of sufficient severity that the absence of immediate medical attention would probably result in any of the following:

- (1) Placing the individual's life in jeopardy.
- (2) Serious impairment to bodily functions.
- (3) Serious dysfunction of any bodily organ or part.

(b) An individual is eligible for assistance under subsection (a) only if the following qualifications exist:

- (1) The individual meets the income and resource standards established by the division under section 3 of this chapter.
- (2) The onset of the medical condition that necessitated medical attention occurred in Indiana.

Sec. 3. (a) The division shall adopt rules under IC 4-22-2 to establish income and resource eligibility standards for patients whose care is to be paid for under the hospital care for the indigent program.

(b) To the extent possible, rules adopted under this section must meet the following conditions:

- (1) Be consistent with IC 12-15-21-2 and IC 12-15-21-3.
- (2) Be adjusted at least one (1) time every two (2) years.

(c) The income and eligibility standards established under this section do not include any spend down provisions available under IC 12-15-21.

(d) In addition to the conditions imposed under subsection (b), rules adopted under this section must exclude a Holocaust victim's

settlement payment received by an eligible individual from the income and eligibility standards for patients whose care is to be paid for under the hospital care for the indigent program.

Sec. 4. A hospital shall provide a patient and, if the patient is not able to understand the statement, the patient's representative with a statement of the eligibility and benefit standards adopted by the division if at least one (1) of the following occurs:

- (1) The hospital has reason to believe that the patient may be indigent.
- (2) The patient requests a statement of the standards.

**Chapter 4. Application for Assistance**

Sec. 1. To receive payment from the division for the costs incurred in providing care to an indigent person, a hospital must file an application with the county office of the county in which the hospital is located.

Sec. 2. A hospital must file the application with a county office not more than thirty (30) days after the patient has been admitted to the hospital, unless the patient is medically unable to sign the application and the next of kin or legal representative of the patient is unavailable.

Sec. 3. The division shall adopt rules under IC 4-22-2 prescribing the following:

- (1) The form of an application.
- (2) The establishment of procedures for applications.
- (3) The time for submitting and processing claims.

Sec. 4. The division and a county office shall make application forms available to a hospital upon request.

Sec. 5. A hospital or an attending physician may assist the patient in the preparation of an application for assistance under the hospital care for the indigent program.

Sec. 6. A person who in good faith provides assistance in the completion of an application under this chapter is immune from civil or criminal liability arising from the assistance.

Sec. 7. (a) A patient must sign an application if the patient is medically able to sign.

(b) If a patient is medically unable to sign an application, the patient's next of kin or a legal representative of the patient, if available, may sign the application.

(c) If no person under subsections (a) and (b) is able to sign the application to file a timely application, a hospital representative may sign the application instead of the patient.

Sec. 8. (a) A patient may file an application directly with the county office in the county where the hospital providing care is located if the application is filed not more than thirty (30) days after the patient's admission to the hospital.

(b) Reimbursement for the costs incurred in providing care to an eligible person may only be made to the providers of the care.

**Chapter 5. Eligibility Determinations; Investigations**

Sec. 1. A county office shall, upon receipt of an application of a patient admitted to a hospital, promptly investigate to determine the patient's eligibility under the hospital care for the indigent program.

Sec. 2. (a) The hospital providing medical care to a patient shall provide information the hospital has that would assist in the verification of indigency of a patient.

(b) A hospital that provides information under subsection (a) is immune from civil and criminal liability for divulging the information.

Sec. 3. If the division or county office is unable, after prompt and diligent efforts, to verify information contained in the application that is reasonably necessary to determine eligibility, the division or county office may deny assistance under the hospital care for the indigent program.

Sec. 4. The division or county office shall notify, in writing, the patient and the hospital of the following:

- (1) A decision concerning eligibility.
- (2) The reasons for a denial of eligibility.
- (3) That either party has the right to appeal the decision.

**Chapter 6. Denial of Eligibility; Appeals; Judicial Review**

Sec. 1. If the division or county office determines that a patient is not eligible for payment of medical or hospital care, an affected person may appeal to the division not later than ninety (90) days after



the mailing of notice of that determination to the affected person at the person's last known address.

Sec. 2. If the division or county office:

- (1) fails to complete an investigation and determination of eligibility under the hospital care for the indigent program within forty-five (45) days after the receipt of the application filed under IC 12-16.1-4; or
- (2) fails or refuses to accept responsibility for payment of medical or hospital care under the hospital care for the indigent program;

a person affected may appeal to the division not more than ninety (90) days after the receipt of the application filed under IC 12-16.1-4.

Sec. 3. The division shall fix a time and place for a hearing before a hearing officer appointed by the director of the division.

Sec. 4. A notice of the hearing shall be served upon all persons interested in the matter at least twenty (20) days before the time fixed for the hearing.

Sec. 5. (a) Following the hearing, the division shall determine the eligibility of the person for payment of the cost of medical or hospital care under the hospital care for the indigent program.

(b) If the person is found eligible, the division shall pay the reasonable cost of the care to the persons furnishing the care, subject to the limitations in IC 12-16.1-7.

Sec. 6. A person aggrieved by a determination under section 5(a) of this chapter may appeal the determination under IC 4-21.5.

Sec. 7. (a) The division shall adopt rules under IC 4-22-2 that provide for an administrative appeal procedure that is responsive to the needs of patients and providers.

(b) The procedure must provide for the following:

- (1) The location of hearings.
- (2) The presentation of evidence.
- (3) The use of telecommunications.

#### Chapter 7. Cost of Care and Payment

Sec. 1. The division shall pay the following, subject to the limitations in section 4 of this chapter:

- (1) The necessary costs of medical or hospital care for indigent patients.
- (2) The cost of transportation to the place of treatment arising out of the medical or hospital care for indigent patients.

Sec. 2. (a) Except as provided in section 5 of this chapter, claims for payment shall be segregated by year using the patient's admission date.

(b) Each year, the division shall pay claims as provided in section 4 of this chapter without regard to the county of admission or that county's transfer to the state fund.

Sec. 3. A payment made to a hospital under the hospital care for the indigent program must be on a warrant drawn on the state hospital care for the indigent fund established under IC 12-16-14.

Sec. 4. (a) Each year, the division shall pay two-thirds (2/3) of each claim upon submission and approval of the claim.

(b) If the amount of money in the state hospital care for the indigent fund in a year is insufficient to pay two-thirds (2/3) of each approved claim for patients admitted in that year, the state's and a county's liability to providers under the hospital care for the indigent program for claims approved for patients admitted in that year is limited to the sum of the following:

- (1) The amount transferred to the state hospital care for the indigent fund from county hospital care for the indigent funds in that year under IC 12-16.1-14.
- (2) Any contribution to the fund in that year.
- (3) Any amount that was appropriated to the state hospital care for the indigent fund for that year by the general assembly.
- (4) Any amount that was carried over to the state hospital care for the indigent fund from a preceding year.

(c) This section does not obligate the general assembly to appropriate money to the state hospital care for the indigent fund.

Sec. 5. Before the end of each state fiscal year, the division shall, to the extent there is money in the state hospital care for the indigent fund, pay each provider under the hospital care for the indigent program a pro rata part of the one-third (1/3) balance on each approved claim for patients admitted during the preceding year.

Sec. 6. If:

- (1) a claim for a patient admitted during a particular year is not submitted by the deadline established by the division; and
- (2) the failure to submit the claim is not the fault of the provider;

the claim shall be considered a claim for the year the claim is submitted for purposes of payment under this chapter.

Sec. 7. The division and a county office are not responsible under the hospital care for the indigent program for the payment of any part of the costs of providing care in a hospital to an individual who is not either of the following:

- (1) A citizen of the United States.
- (2) A lawfully admitted alien.

Sec. 8. The division and a county office are not liable for any part of the cost of care provided to an individual who has been determined to be a patient described in the rules adopted under IC 12-16.1-10.

Sec. 9. IC 12-16.1-2 through IC 12-16.1-16 do not affect the liability of a county with respect to claims for hospital care for the indigent for patients admitted before January 1, 1987.

Sec. 10. (a) The budget agency shall estimate for each fiscal year the cost savings to the state hospital care for the indigent fund as the result of the provision of Medicaid to an individual described in IC 12-15-2-12 and IC 12-15-2-13.

(b) The budget agency shall, each fiscal year, recommend to the general assembly that an amount equal to the cost savings described in subsection (a) be transferred from the state hospital care for the indigent fund to the state general fund.

Sec. 11. Providers eligible for payment under IC 12-15-15-9 may not receive payment under this chapter.

Sec. 12. All providers receiving payment under this chapter agree to accept, as payment in full, the amount paid for the hospital care for the indigent program for those claims submitted for payment under the program, with the exception of authorized deductibles, co-insurance, co-payment, or similar cost sharing charges.

#### Chapter 8. Disproportionate Share Providers

Sec. 1. As used in this chapter, "inpatient days" includes:

- (1) days provided by an acute care subunit of the provider; and
- (2) inpatient days attributable to Medicaid and hospital care for the indigent beneficiaries from other states.

Sec. 2. A payment adjustment consisting of an additional percentage payment for each service paid under the hospital care for the indigent program made to a disproportionate share hospital licensed under IC 16-21 that meets the requirements under section 3 of this chapter.

Sec. 3. A provider is a disproportionate share hospital if the provider's Medicaid inpatient utilization rate is at least one (1) standard deviation above the mean Medicaid inpatient utilization rate for providers receiving Medicaid payments in Indiana.

Sec. 4. A provider's Medicaid inpatient utilization rate is a fraction (expressed as a percentage) in which:

- (1) the numerator is the provider's total number of Medicaid and health care for the indigent inpatient days in a cost reporting period; and
- (2) the denominator is the total number of the provider's inpatient days in that same period.

Sec. 5. A disproportionate share hospital must receive a twenty percent (20%) adjustment for each service.

#### Chapter 9. Rate of Payment

Sec. 1. The rate of payment for the services and materials provided by hospitals and physicians under the hospital care for the indigent program is the same rate as payment for the same type of services and materials under the rules adopted by the secretary under Medicaid.

#### Chapter 10. Rules

Sec. 1. The division shall, with the advice of the division's medical staff, the division of mental health, the division of disability, aging, and rehabilitative services, and other individuals selected by the director of the division, adopt rules under IC 4-22-2 to do the following:

- (1) Provide for review and approval of services paid under the hospital care for the indigent program.

(2) Establish limitations consistent with medical necessity on the duration of services to be provided.

(3) Specify the amount of and method for reimbursement for services.

(4) Specify the conditions under which payments will be denied and improper payments will be recovered.

Sec. 2. To the extent possible, rules adopted under section 1 of this chapter must be consistent with IC 12-15-21-2 and IC 12-15-21-3.

Sec. 3. The rules adopted under section 1 of this chapter must include rules that will deny payment for services provided to a patient after the patient is medically stable and can safely be discharged.

Sec. 4. (a) The division shall adopt rules under IC 4-22-2 necessary to establish a statewide collection system of data concerning the hospital care for the indigent program.

(b) The following data must be collected:

(1) Patient demographics.

(2) Types of services provided by hospitals.

(3) Costs of particular types of services provided by hospitals.

(c) A hospital that provides services under the hospital care for the indigent program shall file copies of all claims submitted under the program with the contractor engaged by the division to adjudicate claims.

Sec. 5. The division may adopt rules under IC 4-22-2 that are in addition to and consistent with the rules required to be adopted under IC 12-16.1-6 governing appeals brought under the hospital care for the indigent program to the division.

#### Chapter 11. Recovery of Payments by Division

Sec. 1. The division may recover amounts paid under the hospital care for the indigent program by the division from the following:

(1) A patient approved for assistance.

(2) A person legally responsible for those patients approved for assistance.

(3) The estate of the patient or person.

Sec. 2. The division is subrogated, to the extent of the assistance given by the division, to the rights that a patient receiving assistance under the hospital care for the indigent program has against any other person who is in any part liable for the illness or injury for which assistance was granted.

#### Chapter 12. County With Health and Hospital Corporation; Responsibility for Medical Cost

Sec. 1. This chapter applies to a county having a health and hospital corporation created under IC 16-22-8-6.

Sec. 2. The division is responsible for the emergency medical care given in a hospital to an individual who qualifies for assistance under this chapter, subject to the limitations in IC 12-16.1-7.

Sec. 3. The hospital providing care shall transfer the patient to a hospital operated by the health and hospital corporation as soon as the attending physician determines that the patient's medical condition permits the transfer without risk of injury to the patient.

Sec. 4. (a) If a hospital owned by the health and hospital corporation is:

(1) unable to care for a patient; or

(2) unable to treat a patient at the time a transfer is requested by the hospital initiating treatment;

the hospital initiating treatment may continue to treat the patient until the patient's discharge.

(b) Subject to the limitations in IC 12-16.1-7, the division shall pay the costs of care.

Sec. 5. The division is not responsible for the following:

(1) The payment of nonemergency medical costs, except as provided under the hospital care for the indigent program.

(2) The payment of medical costs accrued at a hospital owned or operated by a health and hospital corporation, except for hospital care provided under this chapter to a person not residing in Marion County.

#### Chapter 13. Immunity

Sec. 1. A hospital, a physician, or an agent or employee of a hospital or physician that provides services in good faith under the hospital care for the indigent program is immune from liability to the extent the liability is attributable to at least one (1) of the following:

(1) The requirement that a patient be transferred under IC 12-16.1-12.

(2) The denial of payment under IC 12-16.1-10.

Sec. 2. Section 1(1) of this chapter does not limit liability for the determination that the patient's medical condition permits a transfer under IC 12-16.1-12.

#### Chapter 14. Property Tax Levy and Funds

Sec. 1. A county hospital care for the indigent fund is established in each county. The fund consists of the following:

(1) A tax levy on the property located in each county.

(2) The financial institutions tax (IC 6-5.5), motor vehicle excise taxes (IC 6-6-5), and commercial vehicle excise taxes (IC 6-6-5.5) that are allocated to the fund.

Sec. 2. (a) The tax required by section 1(1) of this chapter shall be imposed annually by the county fiscal body on all of the taxable property of the county.

(b) The tax shall be collected as other state and county ad valorem property taxes are collected.

Sec. 3. Each county shall impose a hospital care for the indigent tax levy equal to the product of:

(1) the most recent hospital care for the indigent property tax levied by the county; multiplied by

(2) the statewide average assessed value growth quotient, using all the county assessed value growth quotients determined under IC 6-1.1-18.5-2 for the year in which the tax levy under this section will be first due and payable.

Sec. 4. The state board of tax commissioners shall review each county's property tax levy under this chapter and shall enforce the requirements of this chapter with respect to that levy.

Sec. 5. All receipts derived from the tax levy shall be paid into the county general fund and constitute the county hospital care for the indigent fund.

Sec. 6. (a) The state hospital care for the indigent fund is established.

(b) Before the fifth day of each month, all money contained in a county hospital care for the indigent fund at the end of the preceding month shall be transferred to the state hospital care for the indigent fund.

Sec. 7. (a) The state hospital care for the indigent fund consists of the following:

(1) Money transferred to the state hospital care for the indigent fund from the county hospital care for the indigent funds.

(2) Any contributions to the fund from individuals, corporations, foundations, or others for the purpose of providing hospital care for the indigent.

(3) Money advanced to the fund under IC 12-16.1-15.

(4) Appropriations made specifically to the fund by the general assembly.

(b) This section does not obligate the general assembly to appropriate money to the state hospital care for the indigent fund.

Sec. 8. The division shall administer the state hospital care for the indigent fund and shall use the money currently in the fund to defray the expenses and obligations incurred by the division for hospital care for the indigent. The money in the fund is hereby appropriated.

Sec. 9. Money in the state hospital care for the indigent fund at the end of a state fiscal year remains in the fund and does not revert to the state general fund.

#### Chapter 15. Advancements From State Fund

Sec. 1. The division may request an advancement of money from the state general fund in anticipation of county property tax revenue being transferred to the state hospital care for the indigent fund.

Sec. 2. (a) The budget director shall determine an interest rate that is at least the interest rate earned by the state on investments made from money in the state general fund.

(b) The interest rate shall be paid on the amount that is advanced from the state general fund.

Sec. 3. The amount that may be advanced, plus the projected interest on that amount, may not exceed the amount of county property tax revenue that is expected to be transferred to the state hospital care for the indigent fund during the six (6) months following the date of the request.

**Sec. 4. A request for an advancement must be submitted to the budget agency.**

**Sec. 5. The state board of finance may, on the recommendation of the director of the budget agency, approve an advancement.**

**Sec. 6. If an advancement is approved, the county property tax revenue transferred to the state hospital care for the indigent fund shall be immediately used to repay the amount of the interest and advancements made under this section.**

#### **Chapter 16. Review of Medical Criteria**

**Sec. 1. The division shall review changes made after 1985 in the medical criteria used to establish whether a patient is eligible for assistance under IC 12-16.1-3.**

**Sec. 2. The division's review under this chapter must include the application of the criteria to specific cases and address whether changes to or clarification of the criteria is necessary so that, in practice, the criteria are consistent with the hospital care for the indigent program.**

**Sec. 3. The division shall provide to an interested party a report of the division's review, including the division's findings, conclusions, and recommendations."**

Page 16, between lines 35 and 36, begin a new paragraph and insert:

**"Sec. 2. (a) "Caretaker relative" means a blood relative and those of half blood.**

**(b) The term includes an adoptive parent, grandparent, sibling, and a relative of an adoptive parent.**

**(c) The term also includes a spouse of an individual described in subsection (b), even after the marriage is terminated by death or dissolution."**

Page 16, line 36, delete "2." and insert "3."

Page 17, line 5, delete "3." and insert "4."

Page 17, line 7, delete "4." and insert "5."

Page 18, line 21, delete "parent" and insert "caretaker relative".

Page 19, between lines 30 and 31, begin a new paragraph and insert:

**"Sec. 4. (a) The office shall offer health insurance coverage for the following additional services if the coverage for the services has an actuarial value equal to or greater than the actuarial value of the services provided by the benchmark program determined by the children's health policy board established by IC 4-23-27-2:**

- (1) Prescription drugs.**
- (2) Mental health services.**
- (3) Vision services.**
- (4) Hearing services.**
- (5) Dental services.**

**(b) The office may not impose treatment limitations or financial requirements on the coverage of services for a mental illness if similar treatment limitations or financial requirements are not imposed on coverage for services for other illnesses."**

Page 19, line 31, delete "4." and insert "5."

Page 19, line 33, delete "5." and insert "6."

Page 20, line 18, delete "has" and insert "shall have".

Page 22, line 5, delete "not" and insert "only".

Page 22, line 5, delete "any person" and insert "the following:

- (1) Another provider involved or potentially involved in the care of the individual.**
- (2) A person who:**
  - (A) works under the authority of a provider described in subdivision (1); and**
  - (B) requires the information for the provider's legitimate business or clinical purposes."**

Page 22, between lines 15 and 16, begin a new paragraph and insert:

**"Sec. 1. This chapter applies beginning July 1, 2002."**

Page 22, line 16, delete "1" and insert "2".

Page 22, line 29, delete "2" and insert "3".

Page 22, line 29, delete "1(a)(1)" and insert "2(a)(1)".

Page 22, line 34, delete "1(a)(1)" and insert "2(a)(1)".

Page 22, line 37, delete "3" and insert "4".

Page 22, line 37, delete "sections 4 and 5" and insert "sections 5 and 6".

Page 22, line 37, delete "section 5" and insert "section 6".

Page 22, line 42, after "equal" insert "ninety percent (90%) of".

Page 23, line 9, after "equal" insert "ninety percent (90%) of".

Page 23, line 27, delete "4" and insert "5".

Page 24, line 14, delete "3(3)" and insert "4(3)".

Page 24, line 15, delete "5" and insert "6".

Page 25, line 2, delete "3(3)" and insert "4(3)".

Page 25, line 3, delete "6" and insert "7".

Page 25, line 6, delete "7" and insert "8".

Page 26, between lines 39 and 40, begin a new paragraph and insert:

"SECTION 26. IC 34-30-2-45.5 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JUNE 30, 2002]: **Sec. 45.5. IC 12-16.1-4-6 (Concerning persons who aid a patient in completing an application for assistance under the hospital care for the indigent program).**

SECTION 27. IC 34-30-2-45.7 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JUNE 30, 2002]: **Sec. 45.7. IC 12-16.1-5-2 (Concerning hospitals for providing information verifying indigency of patient).**

SECTION 28. IC 34-30-2-45.9 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JUNE 30, 2002]: **Sec. 45.9. IC 12-16.1-13-1 (Concerning hospitals or persons providing services under the hospital care for the indigent program).**"

Page 27, delete lines 19 through 23.

Page 27, line 24, after "19." insert "IC 12-10-12-27.1; IC 12-10-12-28.5".

Page 27, between lines 27 and 28, begin a new paragraph and insert:

"SECTION 30. THE FOLLOWING ARE REPEALED [EFFECTIVE JULY 1, 2002]: IC 12-7-2-118; IC 12-16-2; IC 12-16-3; IC 12-16-4; IC 12-16-5; IC 12-16-6; IC 12-16-7; IC 12-16-8; IC 12-16-9; IC 12-16-10; IC 12-16-11; IC 12-16-12; IC 12-16-13; IC 12-16-15; IC 12-16-16; IC 34-30-2-44; IC 34-30-2-45; IC 34-30-2-45.3."

Page 27, line 28, delete "JUNE 30" and insert "JULY 1".

Page 27, delete lines 36 through 42.

Page 28, delete lines 1 through 3.

Page 28, between lines 26 and 27, begin a new paragraph and insert:

**"(e) Notwithstanding subsection (d), the office shall not in any event implement the state plan amendment and waiver:**

**(1) before July 1, 2002; and**

**(2) before requisite funds for the program's implementation are available or projected to be available, as determined by the office."**

Page 28, line 27, delete "(e)" and insert "(f)".

Page 28, line 32, delete "(f)" and insert "(g)".

Page 28, line 41, delete "(g)" and insert "(h)".

Renumber all SECTIONS consecutively.

(Reference is to HB 1727 as introduced.)

and when so amended that said bill do pass.

Committee Vote: yeas 22, nays 1.

BAUER, Chair

Report adopted.

#### **COMMITTEE REPORT**

Mr. Speaker: Your Committee on Public Health, to which was referred House Bill 1949, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 11, line 3, delete "nominated by the president of the Indiana Midwives" and insert ".".

Page 11, delete line 4.

Page 15, line 8, delete "the liability of".

Page 15, line 10, delete "in rendering care in an" and insert "may not be held jointly or severally liable for the acts or omissions of a:

(A) licensed certified professional midwife; and  
 (B) licensed physician who has entered into a collaborative agreement under IC 25-23.2-5 with a licensed certified professional midwife, for the acts or omissions of the licensed physician while the physician assists or collaborates with the licensed certified professional midwife to perform midwifery."

Page 15, delete lines 11 through 16.

Page 16, line 35, delete "Immunity of Health Care Providers Rendering Care" and insert "**Liability of Other Health Care Providers**".

Page 16, delete lines 36 through 42, begin a new paragraph and insert:

"Sec. 1. A health care provider (as defined in IC 34-18-2-14) may not be held jointly or severally liable for the acts or omissions of a licensed certified professional midwife."

Page 17, delete lines 1 through 7.

Page 17, line 8, delete "1. This chapter" and insert "**2. (a) This section**".

Page 17, delete lines 18 through 29, begin a new paragraph and insert:

"(b) A person described in subsection (a) may perform an act, a duty, or a function of midwifery that is customarily within the specific area of practice of the employing licensed certified professional midwife if the act, duty, or function is performed under the direction and supervision of the employing licensed certified professional midwife.

(c) A person described in subsection (a) may not be held jointly or severally liable for the acts or omissions of a licensed certified professional midwife.

Sec. 3. Except for the licensed certified professional midwife who performs midwifery with a physician under a collaborative agreement, a health care provider (as defined in IC 34-18-2-14) may not be held jointly or severally liable for the acts or omissions of a licensed physician, who has entered into a collaborative agreement with a licensed certified professional midwife, for the acts or omissions of the licensed physician while the physician assists or collaborates with the licensed certified professional midwife to perform midwifery."

Page 17, line 30, delete "8" and insert "7".

Page 17, between lines 35 and 36, begin a new paragraph and insert:

"Sec. 2. This article does not entitle a licensed certified professional midwife:

- (1) to be present during the birth of a child in a hospital; or
- (2) to provide assistance during the birth process in a hospital."

Page 19, line 8, delete "IC 25-23.2-7" and insert "**IC 25-23.2-6**".

Page 19, line 20, after "act." insert "**However, a member appointed under IC 25-23.2-2-2, as added by this act, must be a certified professional midwife (as defined in IC 25-23.2-1-4, as added by this act).**".

(Reference is to HB 1949 as introduced.)  
 and when so amended that said bill do pass.

Committee Vote: yeas 9, nays 4.

C. BROWN, Chair

Report adopted.

#### COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred House Bill 1951, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill do pass.

Committee Vote: yeas 11, nays 1.

C. BROWN, Chair

Report adopted.

#### COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was

referred House Bill 1958, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 4, line 18, delete "shall" and insert "**may**".

Page 4, line 18, after "IC 4-22-2" insert "**that are necessary**".

Page 4, line 20, delete "The rules adopted under this subsection".

Page 4, line 21, delete "must require that prescription" insert "**Prescription**".

Page 4, line 22, after "technology" insert "**must**".

Page 4, line 22, after "meet" insert "**either of**".

Page 4, line 30, delete "required by the commissioner." and insert "**necessary for the proper adjudication of claims.**".

Page 4, between lines 30 and 31, begin a new paragraph and insert:

"(d) An insurer may not be required to issue a prescription drug information card or other technology to a person more than one (1) time during a twelve (12) month period."

Page 4, line 31, delete "(d)" and insert "(e)".

Page 5, line 1, delete "shall" and insert "**may**".

Page 5, line 3, delete ". The rules adopted under this subsection" and insert "**that**".

Page 5, line 4, delete "must".

Page 5, line 4, delete "that".

Page 5, line 5, after "meet" insert "**either of**".

Page 5, line 13, delete "required by the commissioner." and insert "**necessary for the proper adjudication of claims.**".

Page 5, between lines 13 and 14, begin a new paragraph and insert:

"(d) A health maintenance organization may not be required to issue a prescription drug information card or other technology to a person more than one (1) time during a twelve (12) month period."

Page 5, line 14, delete "(d)" and insert "(e)".

Page 5, line 22, delete "until April" and insert "**for a contract issued or renewed before July**".

Page 5, line 23, delete "April" and insert "**July**".

(Reference is to HB 1958 as introduced.)

and when so amended that said bill do pass.

Committee Vote: yeas 12, nays 0.

C. BROWN, Chair

Report adopted.

#### COMMITTEE REPORT

Mr. Speaker: Your Committee on Elections and Apportionment, to which was referred House Bill 2009, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill do pass.

Committee Vote: yeas 10, nays 0.

KROMKOWSKI, Chair

Report adopted.

#### COMMITTEE REPORT

Mr. Speaker: Your Committee on Education, to which was referred House Bill 2102, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 3, line 29, after "dissolution" insert ":

(A)".

Page 3, line 30, after "assets" insert ", **except funds specified in clause (B),**".

Page 3, line 31, delete "." and insert "; and

(B) funds received from the sponsor shall be returned to the sponsor not more than thirty (30) days after dissolution."

Page 5, delete lines 39 through 42.

Page 6, delete lines 1 through 37.

Page 7, delete lines 19 through 21.

Page 12, after line 42, begin a new paragraph and insert:

"Sec. 8. A sponsor may request and receive financial reports concerning a charter school from the organizer at any time."

Page 19, delete lines 6 through 42.

Page 20, delete lines 1 through 7.

Page 20, line 8, delete "7." and insert "**6.**".

(Reference is to HB 2102 as introduced.)  
and when so amended that said bill do pass.  
Committee Vote: yeas 11, nays 2.

PORTER, Chair

Report adopted.

#### COMMITTEE REPORT

Mr. Speaker: Your Committee on Ways and Means, to which was referred House Bill 2108, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 1, delete lines 1 through 14.  
Page 2, line 23, delete "IC 6-3-2-6.5 and".  
Page 2, line 24, delete "both".  
Page 2, line 24, delete "apply" and insert "**applies**".  
Renumber all SECTIONS consecutively.  
(Reference is to HB 2108 as introduced.)  
and when so amended that said bill do pass.  
Committee Vote: yeas 23, nays 0.

BAUER, Chair

Report adopted.

#### COMMITTEE REPORT

Mr. Speaker: Your Committee on Courts and Criminal Code, to which was referred House Bill 2111, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 1, line 3, delete "subsections" and insert "**subsection**".  
Page 1, line 3, delete "and (c)".  
Page 2, delete lines 3 through 7.  
Page 2, line 8, delete "(d)" and insert "(c)".  
Page 2, line 8, delete "subsections" and insert "**subsection**".  
Page 2, line 8, delete "(e) and (f)" and insert "(d)".  
Page 2, line 16, delete "(e)" and insert "(d)".  
Page 2, line 16, after "subsection" delete "(d)" and insert "(c)".  
Page 2, delete lines 24 through 28.  
Page 2, line 29, delete "(g)" and insert "(e)".  
Page 2, line 30, delete ", (c)," and insert "**or**".  
Page 2, line 30, delete "(e)(2)" and insert "(d)(2)".  
Page 2, line 30, delete ", or (f)".  
(Reference is to HB 2111 as introduced.)  
and when so amended that said bill do pass.  
Committee Vote: yeas 13, nays 0.

DVORAK, Chair

Report adopted.

#### COMMITTEE REPORT

Mr. Speaker: Your Committee on Ways and Means, to which was referred House Bill 2130, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 4, delete lines 32 through 40.  
Page 4, line 41, reset in roman "(b)".  
Page 4, line 41, delete "(d)".  
Page 4, line 41, reset in roman "(c)".  
Page 4, line 41, delete "(e)".  
Page 5, line 5, reset in roman "(c)".  
Page 5, line 5, delete "(e)".  
(Reference is to HB 2130 as introduced.)  
and when so amended that said bill do pass.  
Committee Vote: yeas 22, nays 0.

BAUER, Chair

Report adopted.

#### COMMITTEE REPORT

Mr. Speaker: Your Committee on Ways and Means, to which was referred House Bill 2131, has had the same under consideration and begs leave to report the same back to the House with the

recommendation that said bill do pass.  
Committee Vote: yeas 22, nays 0.

BAUER, Chair

Report adopted.

### HOUSE BILLS ON SECOND READING

#### House Bill 1928

Representative Crooks called down House Bill 1928 for second reading. The bill was read a second time by title.

#### HOUSE MOTION (Amendment 1928-1)

Mr. Speaker: I move that House Bill 1928 be amended to read as follows:

Page 3, line 11, after "utility" insert "**or a not-for-profit sewer utility**".

(Reference is to HB 1928 as printed February 9, 2001.)

CROOKS

Motion prevailed. The bill was ordered engrossed.

#### House Bill 1758

Representative Lytle called down House Bill 1758 for second reading. The bill was read a second time by title.

#### HOUSE MOTION (Amendment 1758-1)

Mr. Speaker: I move that House Bill 1758 be amended to read as follows:

Page 3, between lines 31 and 32, begin a new paragraph and insert:  
**"Sec. 15. The owner of land that is classified under this chapter as cemetery land must allow family members and descendants of persons buried in the cemetery to have at least one (1) day each year to gain access to and visit the cemetery. The date of the visit to the cemetery must be agreed upon between the owner and the family members and descendants of persons buried in the cemetery."**

(Reference is to HB 1758 as printed February 9, 2001.)

LYTLE

Motion prevailed. The bill was ordered engrossed.

#### House Bill 1555

Representative Crooks called down House Bill 1555 for second reading. The bill was read a second time by title.

#### HOUSE MOTION (Amendment 1555-2)

Mr. Speaker: I move that House Bill 1555 be amended to read as follows:

Page 1, delete lines 1 through 17, begin a new paragraph and insert:  
**"SECTION 1. IC 16-21-3-2 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2001]: Sec. 2. The state health commissioner may take action under section 1 of this chapter on any of the following grounds:**

- (1) Violation of any of the provisions of this chapter or of the rules adopted under this chapter.
- (2) Permitting, aiding, or abetting the commission of any illegal act in an institution.
- (3) **Knowingly collecting or attempting to collect from a subscriber (as defined in IC 27-13-1-32) or an enrollee (as defined in IC 27-13-1-12) of a health maintenance organization (as defined in IC 27-13-1-19) any amounts that are owed by the health maintenance organization.**
- (4) Conduct or practice found by the council to be detrimental to the welfare of the patients of an institution."

Page 2, delete lines 1 through 10.

Page 6, delete lines 39 through 42.

Delete pages 7 through 11.

Page 12, delete lines 1 through 33.

Page 14, line 27, after "policy." insert "**The term does not include a transfer of a policy to another insurer."**

Page 18, delete lines 14 through 42.  
 Delete page 19.  
 Page 20, delete lines 1 through 4.  
 Page 20, line 8, after "made" insert ", and to a provider of record upon request".  
 Page 21, delete lines 9 through 42.  
 Page 22, delete lines 1 through 30.  
 Page 23, line 25, delete "the appropriateness or medical necessity of health care" and insert "a determination that a service or proposed service is not appropriate or medically necessary".  
 Page 23, delete line 26.  
 Page 23, line 27, after "that a" insert "service or".  
 Page 25, line 12, delete "three (3)" and insert "five (5)".  
 Page 26, line 14, delete "three (3)" and insert "five (5)".  
 Page 26, line 36, after "profession" insert "and have a similar specialty".  
 Page 26, line 37, after "proposed" delete ",".  
 Page 26, line 37, delete "denied,".  
 Page 29, line 17, delete "that" and insert "if the time frame for a standard review".  
 Page 30, line 42, delete "seventy-two (72) hours" and insert "three (3) business days".  
 Page 31, line 34, delete "shall" and insert "may".  
 Page 31, line 36, after "(2)" insert "if the insurer chooses to reconsider,".  
 Page 31, line 38, delete "subdivision (1)" and insert "subsection (b)".  
 Page 32, between lines 13 and 14, begin a new paragraph and insert:  
 "(d) If an insurer to which information is submitted under subsection (a) chooses not to reconsider the insurer's resolution under IC 27-8-28-17, the insurer shall forward the submitted information to the independent review organization not more than two (2) business days after the insurer's receipt of the information.".  
 Page 47, after line 10, begin a new paragraph and insert:  
 "SECTION 37. [EFFECTIVE UPON PASSAGE] (a) The commissioner of the Indiana department of insurance shall, not later than July 1, 2001, in consultation with representatives of the health insurance industry, begin to study potential solutions to the following issues:  
 (1) Accelerated rate increases for individual health insurance policies that are not actively marketed.  
 (2) Consumer misunderstanding of precertification and preauthorization requirements under preferred provider plans.  
 (b) The commissioner of the Indiana department of insurance shall, not later than July 1, 2002, report to the following individuals any potential solutions that result from the study required under subsection (a):  
 (1) The chairman of the insurance, corporations, and small business committee of the Indiana house of representatives.  
 (2) The chairman of the insurance and financial institutions committee of the Indiana senate.  
 (c) This SECTION expires June 30, 2003.  
 SECTION 38. An emergency is declared for this act".  
 (Reference is to HB 1555 as printed February 9, 2001.)

CROOKS

Motion prevailed. The bill was ordered engrossed.

## House Bill 1477

Representative Kuzman called down House Bill 1477 for second reading. The bill was read a second time by title.

HOUSE MOTION  
 (Amendment 1477-2)

Mr. Speaker: I move that House Bill 1477 be amended to read as follows:

Page 3, line 42, after "." insert: "In enacting this chapter, the general assembly finds that covenants not to compete are negative management techniques which are not favored and undermine the ability of employees to seek jobs with higher wages and improved benefits. Restrictions placed on employees by covenants not to

compete have negative consequences for employees striving for better economic conditions for themselves and their families. Covenants not to compete prevent employees from using their knowledge, skill and ability to compete fully and effectively. The anticompetitive restrictions in covenants not to compete are harmful to the basic tenants of our capitalist economy and every contract by which anyone is restrained from engaging in a lawful trade, business or profession is to that extent void and unenforceable."

Page 4, delete lines 1 through 13.

Page 4, line 14, delete "Sec. 4" and insert "Sec. 2".

Page 4, line 16, delete "or 3".

Page 4, line 17, delete "or 3".

Page 4, after line 24, begin a new paragraph and insert:

"Sec. 3. Reasonable covenants not to compete given by an owner of a business in connection with the sale of that business are not subject to this chapter.

Sec. 4 Nothing contained in this chapter shall be deemed to amend Uniform Trade Secrets Act, IC 24-2-3."

Renumber all SECTIONS consecutively.

(Reference is to HB 1477 as printed February 9, 2001.)

CROOKS

After discussion, Representative Crooks withdrew the motion.

HOUSE MOTION  
 (Amendment 1477-1)

Mr. Speaker: I move that House Bill 1477 be amended to read as follows:

Page 2, line 26, after "Indiana" insert "knowingly".

(Reference is to HB 1477 as printed February 9, 2001.)

RUPPEL

Motion prevailed. The bill was ordered engrossed.

## OTHER BUSINESS ON THE SPEAKER'S TABLE

HOUSE MOTION

Mr. Speaker: I move that Engrossed House Bill 1864 be placed back on third reading for the sole purpose of amendment.

CRAWFORD

Motion prevailed.

## Referrals to Ways and Means

The Speaker announced, pursuant to House Rule 127, that House Bills 1122, 1139, 1248, and 2101 had been referred to the Committee on Ways and Means.

## Reassignments

The Speaker announced the reassignment of House Bill 2021 from the Committee on Public Policy, Ethics and Veterans Affairs to the Committee on Labor and Employment.

HOUSE MOTION

Mr. Speaker: I move that Representative Steele be added as coauthor of House Bill 1066.

CROOKS

Motion prevailed.

HOUSE MOTION

Mr. Speaker: I move that Representatives Foley, Pond, and Kruse be added as coauthors of House Bill 1084.

CHENEY

Motion prevailed.

HOUSE MOTION

Mr. Speaker: I move that Representative Whetstone be added as coauthor of House Bill 1229.

KUZMAN

Motion prevailed.

## HOUSE MOTION

Mr. Speaker: I move that Representative Aguilera be added as coauthor of House Bill 1241.

THOMPSON

Motion prevailed.

## HOUSE MOTION

Mr. Speaker: I move that Representatives Budak, Kromkowski, and Bodiker be added as coauthors of House Bill 1273.

BUCK

Motion prevailed.

## HOUSE MOTION

Mr. Speaker: I move that Representatives Ayres and Kruse be added as coauthors of House Bill 1389.

FRY

Motion prevailed.

## HOUSE MOTION

Mr. Speaker: I move that Representatives Steele, Kuzman, and Ulmer be added as coauthors of House Bill 1478.

PORTER

Motion prevailed.

## HOUSE MOTION

Mr. Speaker: I move that Representative Sturtz be removed as author of House Bill 1600, Representative Porter be substituted as author, and Representative Sturtz be added as coauthor.

STURTZ

Motion prevailed.

## HOUSE MOTION

Mr. Speaker: I move that Representative Whetstone be added as coauthor of House Bill 1638.

KUZMAN

Motion prevailed.

## HOUSE MOTION

Mr. Speaker: I move that Representative Kruse be added as coauthor of House Bill 1649.

SUMMERS

Motion prevailed.

## HOUSE MOTION

Mr. Speaker: I move that Representative Frizzell be added as coauthor of House Bill 1678.

CRAWFORD

Motion prevailed.

## HOUSE MOTION

Mr. Speaker: I move that Representative Kuzman be added as coauthor of House Bill 1727.

CRAWFORD

Motion prevailed.

## HOUSE MOTION

Mr. Speaker: I move that Representative Mannweiler be added as coauthor of House Bill 1856.

DOBIS

Motion prevailed.

## HOUSE MOTION

Mr. Speaker: I move that Representative Whetstone be added as coauthor of House Bill 1863.

CRAWFORD

Motion prevailed.

## HOUSE MOTION

Mr. Speaker: I move that Representative C. Brown be added as coauthor of House Bill 1901.

AVERY

Motion prevailed.

## HOUSE MOTION

Mr. Speaker: I move that Representatives Crooks and Yount be added as coauthors of House Bill 1962.

STILWELL

Motion prevailed.

## HOUSE MOTION

Mr. Speaker: I move that Representative L. Lawson be added as coauthor of House Bill 2034.

KRUZAN

Motion prevailed.

## HOUSE MOTION

Mr. Speaker: I move that Representatives Kuzman, Mannweiler, and Duncan be added as coauthors of House Bill 2037.

COCHRAN

Motion prevailed.

## HOUSE MOTION

Mr. Speaker: I move that Representative Aguilera be added as coauthor of House Bill 2141.

THOMPSON

Motion prevailed.

## HOUSE MOTION

Mr. Speaker: I move that Representatives Ayres, Cheney, and C. Brown be added as coauthors of House Concurrent Resolution 20.

FRIEND

Motion prevailed.

Pursuant to House Rule 60, committee meetings were announced.

On the motion of Representative McClain the House adjourned at 4:35 p.m., this fourteenth day of February, 2001, until Thursday, February 15, 2001, at 10:00 a.m.

JOHN R. GREGG

Speaker of the House of Representatives

LEE ANN SMITH

Principal Clerk of the House of Representatives